



BOBBY JINDAL, Governor

Office^{of} Juvenile Justice

MARY L. LIVERS, Ph.D., MSW, Deputy Secretary

HEALTH SERVICES RFP# 403PURHCS

ADDENDUM II includes the following:

1. Questions and Answers
2. Health Screening Form
3. Physical Exam Form
4. List of Top 20 Drugs
5. Current Health Care Provider Contract
6. List of Equipment
7. Quarterly Statistics Report

HEALTH SERVICES

ADDENDUM #2

QUESTIONS AND ANSWERS

1. Who currently delivers the services, if anyone?

LSU Health Sciences Center New Orleans.

2. Can I get a copy of the current terms if there is a current provider?

A copy of the current health services contract is contained in this addendum.

3. Is there a mandatory pre-bid and if not, how can we go about determining interested parties so as to approach each as a prospective?

There are pre-bid site visits which must be scheduled by contacting Marvel Adams at Marvel.Adams@la.gov.

4. Will there be one procurement for the four secure youth facilities (Bridge City, Jetson, Swanson and Coughatta)? Or will there be multiple procurements? If multiple procurements, how many are anticipated? Approximately how many different bids does the department anticipate receiving?

In reference to multiple procurements, page 27, Attachment I states,

"This is a Request for Proposal (RFP) for health services to include medical, dental, mental health, and related support services for male youth in custody in two (2) of YS' secure juvenile facilities. If a suitable offer is made in response to this RFP, the YS may enter into a contract to have the selected Contractor(s) perform all or part of the work. The provision of services is primarily provided on-site at the two secure juvenile facilities. Specialized services may be provided through agreements with area providers such as hospitals, clinics, medical specialists, laboratories, and other specialized services.

This advertisement for comprehensive health services is open to the public which makes it difficult to anticipate the number of responses, procurements or number of potential bidders.

5. Should we be awarded the contract for 403PURCHT, will there be a conflict of interest should we decide to also bid on the RFP No. 403PURHCS?

Yes, this would represent a conflict of interest as the winning proposer for 403PURHCT will serve on the Evaluation Committee for 403PURHCS.

6. What if we were to be awarded the 403HCT, will we be able to subcontract to the winning company of the 403PURHCS?

According to the scope services outlined in the 403HCT RFP, it would be a conflict of interest for the newly selected contractor to subcontract with the Primary Contractor awarded the contract for 403HCS.

7. Who is the existing comprehensive health, pharmacy services, mental health and dental services for you vendor? Is this vendor expected to bid on the new RFP(s) for health services? If so, are the services being procured the same services as those the vendor currently provides? If not, why not? Please provide a copy of the current vendor's contract.

LSU Health Sciences Center New Orleans.

The RFP process is open to the public and anyone can submit a proposal based on the specifications of the RFP. The services to be provided are described in the RFP and include full comprehensive health, pharmacy services, mental health and dental services.

8. Attachment I indicates that contractor will be onsite at YS' headquarters and facilities for vendor presentations and site visits. Please identify the location (s) and number of site visits.

Site visit information is included in the RFP Schedule of Events, Section 2.2, and Page 5.

9. Attachment I refers to the development of a transition plan. Is a formal readiness review of the new vendor anticipated? If the current vendor is awarded the contract for comprehensive health, pharmacy services, mental and dental services for youth, what kind of transition services does the department anticipate needing from the contractor?

As outlined in the Scope of Services in Attachment I, YS seeks professional consulting services which will deliver expertise in assisting in with the planning, developing and implementation of a successful transition plan with the new contractor for healthcare services.

10. On page 21, in the second dot point, the RFP directs bidders to describe in proposals "staff orientation and in-service training for proposed program". To what staff and training does this refer? Does this refer to training bidder's staff regarding technical assistance duties or something else? Or, does this refer to training the new vendor's staff regarding their duties?

Attachment II – Proposal Information, item #2, Proposed Project Staff, Including Qualifications of Personnel specifically asks the proposer to provide information about the proposer's assigned personnel that are key to successful achieving the goals and objectives of the RFP. On page 21, the second dot refers to the proposer's subcontracted personnel.

Louisiana, Youth Services Office of Juvenile Justice
Questions in reference to RFP No. 403PURHCS / 'Health Services'

Submitted by Armor Correctional Health Services

March 16, 2010

Questions pertaining to BCCY-Bridge Facility:

1. Because a Youth was "on watch" in one of the three Infirmary rooms (during our site visit), we were unable to observe how these rooms accomplish the expectation of youth being within sight and sound of medical staff in the nurse station. Please explain how that requirement is currently met.

Security is assigned to the room and has a radio to call to the nurse's station.

2. With no negative air rooms at this facility, what is the procedure for isolation for a suspected positive TB patient?

An initial positive TB patient would be sent for inpatient treatment until no longer infectious.

3. How are routine x-rays accomplished at this facility, via Mobile Portable on-site or off-site?

Currently provided off-site, however, we would like to see a more efficient alternatives demonstrated by proposers.

4. How many times days are sick call requests picked up by medical staff from locked boxes throughout the facility?

Once daily.

5. Does current nursing staff work 8 or 12 hour days?

8 hour shifts.

6. Please provide a list of medical equipment that will remain at the facility.

Please refer to equipment list posted.

7. The RFP requests annual TB Testing for facility staff outside of medical. Please provide an average number for staff involved in these operations (weekly or monthly basis).

Currently there are 152 employees at JCY and 175 employees at Bridge City.

8. Are there any specialty on-site clinics held at this facility? (*i.e.*, optometry, orthopedics, other)?

Dental only, but we would be interested in exploring efficient ways to provide specialty services to our youth.

Questions pertaining to JCY Facility-Baton Rouge:

9. Considering the logistics of the Infirmary to the Units, where a vehicle needs to be used to reach those units, would the OJJ consider transporting medical staff or would they use personal vehicles? (Note: we assume that medical staff will deliver medications to other areas besides the Winter Unit).

Two vehicles are assigned to the medical staff for use.

10. Is there any consideration for youth at BCCY to be transported in groups in order to access the on-site capabilities and equipment available at JCY (*i.e.*, X-ray, dental, negative air rooms for isolation etc.)?

At this time the agency has decentralized healthcare services for the youth. Healthcare services should be provided on-site at the facility where the youth is housed as much as possible.

Questions pertaining to both BCCY & JCY:

11. In view of RFP language for preference in utilizing the State's "Charity Hospital," who is financially responsible for in-patient care and Emergency Department Care at this hospital? According to LA RS 15:831 youth in the secure care facility may receive medical services in the Charity Hospital System. For more information with understanding the Louisiana State University Hospital System, please refer to the LSUHCSC Hotline 1-866-431-4571 or <https://www.lsuhs hospitals.org>.

12. Please explain any procedure for use of parent-provided insurance for youth who may require healthcare services outside of OJJ.

*At this time the agency does not have a procedure for parent-provided insurance, once a youth becomes award of the state, the state is responsible for their care.

13. Please explain how vendors procure medications from the State Pharmacy and/or pharmacist? How is this handled financially? Are youth prescriptions filled on-site on the same working day they are ordered? Do nurses have access to any legend stock medications for off hours/weekends for stat doses? Are all medications obtained via the State Pharmacy? Please explain process and what is expected by the vendor.

Currently, medications are procured from a vendor and the pharmacy is staffed by a YS pharmacist. We invite proposers to demonstrate a more efficient pharmacy operation.

14. Is the expectation that the vendor will replace the State Pharmacy System as it exists currently?

According to the RFP in the scope of services starting on page 43, pharmacy services are being

solicited.

15. Do the existing computers in the Infirmary, Offices, and Mental Health area offer any scheduling, youth location or other data which is available to medical and mental health staff? Please list how that data is used.

Scheduling is handled manually.

16. Are there any Certified Nursing Assistants or Medical Assistants utilized at either facility?

No

17. What level of nurse is passing medications?

If the nurse passing medications is a Licensed Practical Nurse, what other duties is this position responsible for?

Currently the LPN is sharing that responsibility. LPNs are allowed to practice within the scope of their practice according to the Louisiana STATE BOARD OF PRACTICAL NURSE EXAMINERS.

18. Are both medical and mental health staff currently employed by LSU?

Yes

19. How long has the current vendor provided services?

Approximately 10 years.

20. Do youth "Keep on Person" any medications such as asthma inhalers?

No

21. Please provide the layout or format of a medical chart (*i.e.*, sections, chart order expected, or any specific requirements by OJJ).

We encourage proposers to plan the formatting of a comprehensive medical record that is appropriate to the population served and compatible to the electronic medical record that will be proposed.

22. Please provide a copy of the current Health Request Form, Physical Assessment Form and Intake Screening Form.

Copies of forms that are available have been posted.

23. On page 30, on the third bullet below the phrase "*The Contractor shall assure that the following characteristics are maintained or implemented*", please clarify the second sentence:

"Elective admissions shall be approved and "prior certified" by the NV (Network Provider) and at the end of said bullet, a statement indicating "there will be no billing applied to it". Does this refer to the Infirmary?

If a service is rendered on-site in the infirmary by an approved network vendor through the primary vendor, the primary vendor will be responsible for the costs.

24. Are any staff currently under union contract(s)?

YS OJJ staff is not currently under union contract. The current medical provider maintains information for their staff.

25. Is the current Telemedicine Service being provided solely by LSU Practitioners?

The current telemedicine system is managed by the current provider.

26. Please provide any monthly/annual statistics for the following for both facilities:

- Number of In-Patient Hospitalizations and total number of days
- Number of Emergency Department Visits
- Number & kinds of Off -Site visits/procedures via community specialists
- Number and types of identified chronic illnesses of youth, such as diabetics, asthmatics, seizure patients or other chronic illnesses
- Number of positive PPD's (Tuberculin Tests)
- Number of Health Assessments by Provider
- Number of Sick Call seen by the RN
- Percentage of youth on medical and anti psychotic medications from a recent month
- Average number of Intakes per month
- Average number of youth seen by psychiatrist per month
- Average number of one on one counseling by Mental Health Staff
- Number of routine chest x-rays done on-site
- Number of all other x-rays completed
- Number of Laboratory Tests completed

Currently, at least 30% of the population at BCCY, and approximately 48% at JCY are taking psychotropic medications.

Unfortunately at this time we do not have an electronic management system to capture and report this information succinctly and timely. It is our intent to move in this direction with the new healthcare provider. A copy of the most recent quarterly reports, October – December 2009, is posted to give proposers a snapshot of healthcare data that represents our current population.

27. Please list positions that serve in medical or mental health areas that are OJJ Employees and

indicate if they will remain in their respective positions with the new contract.

There are no OJJ employees in positions that directly serve in the medical and mental health areas.

28. What were there total health care costs for 2008 and 2009? (Kindly break this down into medical, psychiatric, pharmaceutical costs.)

The medical expenditures for the fiscal year, July 1, 2008 – June 30, 2009 totaled \$10,805,181.29. A breakdown by categories of services cannot be made available at this time. Funding as well as a population decrease was mandated by the state legislature since that time.

29. Will the vendor be responsible for healthcare when patient is off site, either working, on furlough or in school?

Yes

30. Is this is a 3 year contract or are annual extensions to be negotiated?

3 year contract with options for 2- one year extensions.

31. Does vendor pay for all in-patient hospital days?

Yes, if it's outside of the charity hospital system.

32. Does vendor pay for off-site specialty care?

Yes, if it's outside of the charity hospital system.

33. Please provide a current salary breakdown.

This information is maintained by the current healthcare provider.

34. Are the Medical Doctors pediatricians, internists or Dos?

Pediatricians and adolescent health medical doctors.



March 15, 2010

Ms. Marvel Adams, RFP Coordinator
Youth Services
P.O. Box 66548, Audubon Station
Baton Rouge, LA 70896-6548

Sent via email: marvel.adams@la.gov

RE: RFP #403PURHCS- Health Services

Dear Ms. Adams:

Per the above-referenced RFP and discussion in the pre-proposal tours, CCS would like to submit these clarifying questions:

1. Please provide the current medical staffing plans for each facility (p. 36 of the RFP instructs us to review these)?

Reference was made in the RFP on page 36 to reviewing current national trends in staffing according to similar size populations and programming.

2. Please provide the current contract with Louisiana State University for these services.

We received several requests for OJJ's current contract for these services. Please be advised that the agreement with LSUHSC was entered into approximately ten years ago and came about during efforts to end federal litigation. It is more similar to an interagency agreement than to a contract between parties. As a teaching school LSU's interests and mission are different than those of private business and are reflected in contract costs. Prospective bidders should not rely on the monetary amount of the LSU contract in determining their budget. OJJ is seeking a contractor who can deliver an efficient, cost-saving model of delivery of health care services.

3. What is Youth Services' next annual budget for health care at these two facilities?
Final budgets in state agencies have to receive final approval that has not been presented or approved yet. This information is not available.

4. What is the current electronic management system for the youth in the custody of Youth Services?

A current electronic management system does not exist.

5. Is there an electronic program currently in place for receiving screenings?

No

6. Who owns the software for the current electronic Medication Administration Record (eMAR)?

As stated in the RFP, YS is looking for proposers to demonstrate how they will implement an electronic health record system.



7. Please provide the number of employees at Bridge City and Jetson, for participation in the TB testing and HepB vaccinations. What are the turnover rates of staff at each facility?

This will vary due to the number of vacancies and ability to rehire at each facility.

8. Please provide a current list of equipment that will be retained by Youth Services within the infirmary at Jetson Center for Youth. Please provide the same for the infirmary at Bridge City. Who will retain ownership of the EKG machines currently housed at each facility?

Please refer to equipment list posted.

9. At Bridge City, the tour referenced two dorms used for Sex Offenders. Are these youth kept segregated from the other youth? Where will Health Call be performed for these youth?

No, Health Call should be performed in the infirmary or school clinic area for all youth.

10. Based on current staffing, is dental care being provided in a timely manner (i.e. as specified in the RFP)?

It is expected that the new provider will plan a schedule that will meet the dental needs of the youth at each facility.

11. At Jetson, how often are the youth sent out for audiology services?

Youth are referred to audiologists (specialists) only when an abnormal hearing screening indicates it is required.

12. Please provide the number of telemedicine appointments each month for the past 24 months. Please provide the top three indications for which telemedicine is being utilized.

Unfortunately at this time we do not have an electronic management system to capture and report this information succinctly and timely. It is our intent to move in this direction with the new healthcare provider. A copy of the most recent quarterly reports, October – December 2009, is posted to give proposers a snapshot of healthcare data that represents our current population.



13. RFP page 11: Please confirm that under "Current Assets", it is current ASSETS or line of credit, not LIABILITIES that must equal no less than 25% of the annual operating costs.

The formula is "Current Assets minus Current Liabilities or a line of credit is = or > 25% of the annual operating cost."

14. RFP page 12: Please clarify requirement that "information required of the Proposer under the terms of this RFP" will also be required of subcontractors.

Subcontractors have to provide the same information required of the Prime contractor, i.e, qualifications, licensure, credentials, financials, etc.

15. RFP page 20 (Item 5.7.C) tells bidders to calculate per youth per day costs using facility capacity. RFP page 85 (Item 1.1) says to use total estimated population. Please clarify which figure you would like us to use.

Calculations may be computed both ways and presented to show which is the most cost effective.

16. RFP page 56 refers to a "medical expenditure cap". Please define?

Please refer to section 5.7, Cost for clarification in the RFP.

17. Who currently manages/communicates on cases when youth are admitted to a hospital?

The medical staff is directly involved with the case management and participates with facility staff in reporting and monitoring status of all youth.

18. Are there any current lawsuits, consent decrees, or other legal matters pertaining to medical services in your facility?

No consent decrees or lawsuits pending related to medical services.

19. *On a Monthly Average over the last two years, and separately for each facility, please provide the number of (or percentage of population, depending on availability of information):*

- | | |
|------------------------------|--|
| • Nursing Health Call visits | • X-rays performed on-site (Jetson only) |
| • MD/PA Health Call visits | • Psychologist Health Call visits |



- Psychologist Health Call visits
- Dental visits
- Ambulance transports
- ER visits (total, and how many resulting in admission)
- Hospital Admissions
- Hospital Inpatient Days
- Outpatient surgeries
- Outpatient Specialty visits (by type)
- On-site specialty care visits by type (Ortho, Optometry, etc.)
- PPDs planted
- Positive PPDs
- Patients with STDs (Chlamydia, gonorrhea, syphilis, etc.)
- Patients with:
 - i) Asthma/ COPD
 - ii) Diabetes
 - iii) Infectious disease
 - iv) Hypertension/cardiovascular
 - v) Seizure disorder
- Number of Prescription eyeglasses purchased
- Grievances filed in relation to Medical Services
- Outpatient Radiology visits
- Other Outpatient visits
- Suicide attempts
- Suicides completed
- Number of Patients on Prescription Medications
- Number of Patients on Psychotropic Medications
- Number of Patients on HIV Medications
- Number of Patients on Hep C treatment

Unfortunately at this time we do not have an electronic management system to capture and report this information succinctly and timely. It is our intent to move in this direction with the new healthcare provider. A copy of the most recent quarterly reports, October – December 2009, is posted to give proposers a snapshot of healthcare data that represents our current population.

For the last two years, please provide, for each facility, the annual costs of:

- Ambulance transports
- ER visits (total, and how many resulting in admission)
- Hospital Inpatient Costs
- Outpatient surgeries
- Outpatient Specialty visits
- By patient, off-site care costs totaling over \$15,000 in one year(NONE)
- Outpatient Radiology visits
- Other Outpatient visits
- Pharmaceuticals
- Inpatient Mental Health admissions



Please see the answer to the previous question.

We appreciate the opportunity to propose a quality health care program for the Jetson and Bridge City Centers for Youth! If you have any questions or need any clarification, please feel free to contact me anytime at gmrose@ccsks.com or via my cell phone at 615-268-8881.

Best Regards,

A handwritten signature in black ink that reads "Gina M. Rose". The signature is fluid and cursive, with a long horizontal stroke at the end.

Gina M. Rose
Director of Business Development



Dear Ms. Adams,

Below please find questions we have regarding the RFP 403PURHSC Scope of Services:

1. Please clarify the Physician on-site requirement – 5 days rounding in the Infirmary vs. two 8 hour days.

See p. 30 in the Scope of Services, in the RFP. Proposers may demonstrate efficient physician coverage in addition to what's outlined in the RFP as an addendum.

2. Dental – what equipment and instruments are available? Is there a Dental Assistant currently on staff working with the Dentist?

Refer to Medical Equipment List. Dental Hygienist and Dentist.

3. How many first aid kits and AEDs are needed (p. 41)?

BCCY – 13 First Kits, 1 – AED, JCY – 11, 1 - AED

4. Will the Proposer be required to purchase / copy the forms used for medical, dental and mental health care?

Paper forms should be developed electronically and presented for approval by YS Health Authority.

5. Please provide a copy of the current staffing plan and schedule.

Reference was made in the RFP on page 36 to reviewing current national trends in staffing according to similar size populations and programming.

6. Please clarify the difference between “health call” (p.33) and “health complaints” (p. 34).

Health Call is the name of the process, health complaint is what the actual health or illness reason a youth may request to be seen by a healthcare provider.

7. How many pre-employment physicals for correctional staff are conducted annually.

This number varies by facility according to the number and reasons for vacancies and the ability to rehire staff.

8. Please list the medical equipment at each facility currently available for use by the Proposer and the age of each.

Refer to the List of equipment posted.

9. What services are currently being provided through the telemedicine program?

The telemedicine system is managed by the current medical provider.

10. Please list the current Off-Site Provider Network utilized by each facility for the following:

1. Network of regional and tertiary care settings for outpatient specialty services.
2. Network of regional and tertiary care settings for inpatient care services.
3. Arrangements for local off-site emergency room services.

According to LA RS 15:831 youth in the secure care facility may receive medical services in the Charity Hospital System. For more information with understanding the Louisiana State University Hospital System, please refer to the LSUHCSC Hotline 1-866-431-4571 or <https://www.lsuhs hospitals.org>.

Please provide the following statistics:

4. Average monthly Intakes
5. Average monthly Transfers
6. Average monthly Releases
7. Average monthly Number of Health Service Requests received
8. Average monthly Number of Nurse Sick Calls
9. Average monthly Number of Provider Sick Calls
10. Average monthly Number of Mental Health contacts – Psychiatrist, Psychologist, Counselors
11. Average monthly Number of Physical Assessments
12. Average monthly Number of Chronic Care visits, by type
13. Average monthly Number of Dental exams, extractions
14. Average monthly Number of on-site Specialty Care by type
15. Number of off-site Specialty Care visits, by type, including podiatry, prosthetics – last 2 years
16. Hospitalizations and reason/diagnosis – last 2 years
17. Number of Off-Site visits greater than 30 miles from the facility – last 2 years
18. Cost of Off-Site Specialty Care – last 2 years
19. Cost of Hospitalizations – last 2 years

- 20. Average monthly Number of prescription medications
- 21. Average monthly Number of psychotropic medications
- 22. Average monthly Number of Keep on Person medications
- 23. Pharmacy expenses – All costs for last 2 years

Unfortunately at this time we do not have an electronic management system to capture and report this information succinctly and timely. It is our intent to move in this direction with the new healthcare provider. A copy of the most recent quarterly reports, October – December 2009, is posted to give proposers a snapshot of healthcare data that represents our current population.

Thank you very much for your time.

Best Regards,

John Ritter
Director of Marketing

LOUISIANA HEALTH FIRST

March 15, 2010

To: Marvel, Adams, RFP Coordinator
Fr: Louisiana Health First (Susan C Freeman, Proposal Writer)
Re: Questions for RFP No.: _403PURHCS for Health Services

Each question is directed to each facility separately. Please answer accordingly.

- 1) Is the Charity system going to be available for referrals according to LA RS 15:831?

According to LA RS 15:831, youth in the secure care facility is covered under the Charity Hospital System. For more information with understanding the Louisiana State University Hospital System, please refer to the LSUHCSC Hotline 1-866-431-4571 or <https://www.lsuhs hospitals.org>.

- 2) Is contractor expected to pay for hospital admissions that fall outside of the scope of LA RS 15:831?

Please refer to page 37 in the Scope of Services, off-site patient services.

- 3) Will the contractor be able to utilize out-patient sub-specialty services as per LA RS 15:831?

As per LA RS 15:831 whatever services are available should be accessed.

- 4) What is the youth turnover rate at each facility?

Currently, the average daily census at BCCY is 131, and 76.9 at JCY.

- 5) What's the average length of stay for youth at each facility?

BCCY – 166 days, JCY – 173 days

- 6) How many intakes occurred at each facility in 2009?

BCCY – 200 JCY - 128

- 7) What was the average number of patient days in each infirmary in 2009? In hospitals in 2009?

See recent quarterly report posted for health statistics that are currently available. Unfortunately at this time we do not have an electronic management system to capture and report this information succinctly and timely. It is our intent to move in this direction with the new healthcare provider. A copy of the most recent quarterly reports, October – December 2009, is posted to give proposers a snapshot of healthcare data that represents our current population.

- 8) What kind of references is YS seeking from proposer? Patients, business partners, vendors, employees?

Please refer to page 17, Corporate Background and Experience

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- 9) Is there a pediatrician currently making daily rounds at each facility?

Please refer to the scope of services regarding on-site patient services, health screenings, health appraisals and assessments.

- 10) If a youth has required in-patient psychiatric care services, where did the youth go in the past?

Currently, youth from BCCY and JCY requiring temporary in-patient psychiatric care are sent to Swanson Center for Youth.

- 11) What was the number of youths per unit in 2009? How many beds in each unit?
BCCY – 10 Dorms (Units), Number of Beds per unit is 10 – 14

- 12) If the youth required acute psychiatric care services, where did the youth go in the past?

See answer to # 10.

- 13) How much was spent on psyche meds in 2009?

Psychotropic meds are not invoiced separately; therefore, this information is not available.

- 14) What computer equipment is already on premises and of it, what remains on site for use by contractor? Please list.

Please see equipment list posted.

- 15) For what scope of healthcare services would telemedicine be used? i.e., mental health, general medicine.

The proposer should demonstrate how telemedicine may or may not be efficiently incorporated into the delivery of healthcare services as stated in the RFP.

- 16) Is there an existing off-the-shelf Electronic Medical Records system in place or do we need to create or purchase software for this? If there is an EMR system in place, what type, name, and system requirements?

Proposer should refer to p. 59 in the scope of services, to satisfy requirements for an electronic medical record.

- 17) What Network infrastructure is in place? i.e. Internet connection, speed on connection, routers, wireless networks

JCY -

The network infrastructure – JCY network infrastructure is fiber between all buildings except the warehouse and the front gate which is wireless

Internet/Speed on connection – JCY currently has a fail over, point to point, data circuit with a speed of 3 megabytes.

Router – JCY has a Cisco 3800 series router

Wireless Networks – JCY only has two out buildings currently utilizing a wireless connection (warehouse & front gate) as previously mentioned. The remainder of the campus is connected via fiber, both aerial and buried.

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BCY -

The network infrastructure – BCY network infrastructure is fiber between all buildings with no wireless on the campus.

Internet/Speed on connection – BCY currently has a fail over, point to point, data circuit with a speed of 3 megabytes.

Router – BCY has a Cisco 3800 series router

Wireless Networks – BCY campus is connected via fiber, no wireless is utilized.

- 18) In the RFP, YS states that YS and the contractor jointly will be responsible for the costs associated with acquiring the necessary telemedicine equipment at the institutions and maintaining the telemedicine communication system and equipment...how so?

If a proposer successfully demonstrates that incorporating a telemedicine communication system is cost effective, and once a contract is awarded, shared costs will be discussed during contract negotiations.

- 19) How much did it cost for acquiring, maintaining, and operating telemedicine in 2009?

The current telemedicine system was acquired several years ago, and the costs to maintain are not separate.

- 20) Can proposer contract with telemedicine provider of choice?

Yes, please refer to section 3.7, Subcontracting Information in the RFP.

- 21) If necessary, would it be permissible for contractor to move some equipment to Bridge City from Jetson?

Once the contract has been awarded, the new vendor would have to provide a detailed justification of transferring any equipment from one facility to another to the YS Health Authority.

- 22) Currently, what system is in place for pharmacy services? Automation (ex: unit dose)? 30 day supply Pill cards? In-house pharmacy?

Currently there's an on-site pharmacist at each facility. There system is not automated.

- 23) If automated or in-house pharmacy, who owns pharmacy inventory?

Pharmacists' orders daily.

- 24) What pharmacy hardware/software will remain in the facility? Pill card carts? Computers if automated?

All equipment in the pharmacy will remain. The pharmacy is partially automated.

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25) Is there a list of regularly turned pharmacy inventory for YS? If yes, please provide the list.

Not available.

26) Page 46 number 9 - "Return and refund for unused medication" – the Louisiana Board of Pharmacy's policy is to the contrary if unused meds come from an independent Pharmacy. There is a conflict with your RFP requirement and this policy by the Louisiana Board of Pharmacy. Which is the proposer expected to follow?

27) Page 46 number 17 - Does YS have a Controlled Dangerous Substances license?

28) Page 46 number 18 - what license/s is/are needed?

Answer to questions # 26 – 28, Currently, YS pharmacy holds an institutional pharmacy license, a license for controlled substances, and each pharmacist is individually licensed.

Stock meds can be returned and expired meds are sent to a reverse distributor for credit/refund.

29) Regarding transportation, what is the number of trips per month by facility?

Please refer to Off-Site Transportation, p.40 regarding transportation. The Healthcare provider is responsible for emergency transport.

30) Regarding transportation, what is the time of day for most trips by facility?

Transportation trips may vary.

31) Regarding transportation, primarily what is the mileage for each trip by facility?

Network Providers and hospitals should be identified by proposers to calculate mileage. Please refer to the RFP, Off-Site Transportation, and p. 40.

32) Is there a specific type of vehicle needed to transport youth?

Outside of emergencies, security provides the vehicle.

33) What is the insurance requirement for the transport of youth?

Not applicable, Youth are routinely transported by security. I Ambulances would have to be licensed and insured.

34) Are there any specific trainings or certifications that the drivers will need to transport youth?

Not applicable, see answers to # 32 and #33.

35) How much did the facilities spend on supplies in 2009?

Approximately \$47,937.75 was spent on supplies between the two facilities during fiscal year July 1, 2008 – June 30, 2009.

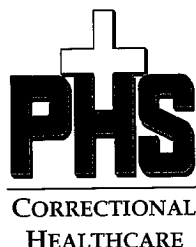
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36) What specifically, are the reporting requirements?

Not sure of what the vendor is referring to here.

37) Does the contractor have to be ACA accredited independently or in conjunction with OJJ's accreditation and what ACA manual is relevant?

In conjunction with OJJ, the healthcare provider will be responsible for achieving and maintaining accreditation for the ACA performance based standards for the healthcare section of the ACA Juvenile Performance Based Standards for Juvenile Correctional Facilities 4th Edition and any standard supplements thereafter.



Suite 200
105 Westpark Drive
Brentwood, TN 37027

—
(615) 373-3100
(800) 729-0069
Fax (615) 350-1350
—

March 16, 2010

Marvel Adams
RFP Coordinator, Youth Services
7919 Independence Blvd.
State Police Building, First Floor
Baton Rouge, LA 70806
225.287.7618
Marvel.Adams@la.gov

**RE: RFP #403PURHCS – Health Services for the Louisiana Department of
Public Safety and Corrections, Youth Services, Office of Juvenile
Justice (DPSC/ YS/OJJ)**

Dear Ms. Adams,

Thank you for the opportunity to visit the JCY and BCCY facilities last week. Michael Miller and Tish Wright were really impressed with the operations and organization at both facilities. PHS is very excited to share our qualifications and expertise with this particular youth population.

PHS would like to make a formal request for an extension to the March 26th due date. As you will see by the detailed questions below, in order for us to prepare the most effective, and cost efficient healthcare program for OJJ, we will need additional time following the response to our questions. Would the OJJ please consider a 30-day extension from the date questions are answered? Under the current timeline, we are only allowed seven days to prepare our response. We are confident that a 30-day extension from the day questions are answered will still allow for Proposal Submission, Proposal Presentations, and Negotiations well before the July 1, 2010 targeted start date.

Upon review of the above referenced RFP, and following our site tours, the following are questions that PHS would like to submit for clarification.

RFP CLARIFICATION:

1. Page 4 – Regarding ADP in table 1.1, In the event of a catastrophic evacuation to JCY, what is the expected per diem cost for this additional population?

Please refer to p. 20 Section 5.7 Cost. In the event of a catastrophic evacuation of BCCY to JCY, the population should not exceed the capacity provided in table 1.1.

2. Are youths from other penal jurisdictions housed at the facility?

No

3. Page 15, section 4.2 – Would the OJJ consider allowing page numbers of *each section* to be numbered sequentially – i.e. 1.1, 1.2, 2.1, 2.2, etc.?

That's acceptable.

4. Page 20 – States, *“While YS will not accept caps in regards to the comprehensive bid price, and any Proposer wanting to provide information services on alternative services and alternative pricing, such as capped services, shall do so on a separate alternative pricing form...”* Are bidders required to submit a full-risk comprehensive bid? Are bidders allowed to submit a comprehensive bid with a cap?

Yes bidders are required to submit a full-risk comprehensive bid, in addition YS welcomes any alternative pricing such as a comprehensive bid with caps while maintaining quality healthcare standards. Any alternative bids must be submitted on a separate pricing form.

5. Page 36, Discharge planning – Continuing medication with a 30-day supply – How is that currently handled?

With advance notice of date of release, YS makes every effort for the youth to have a 30 day supply of medication and receives a referral to a community provider.

6. Page 40 – How many times per year in the past 2 years has the off-site fee of \$200 per youth been charged and collected by the OJJ?

This is a cost containment measure to hold security staff overtime to a minimum for healthcare related transports as a part of this RFP.

7. Page 58 – Please clarify if you are referring to vendor staff or YS staff for each of the following indicators identified in the Employee Health Section of the RFP.

YS Employees

8. Page 71, section 1.2.3 Liquidated Damages – Is this the same standard/ requirement for the current vendor? Please provide the amount paid by the current vendor for Liquidated damages each year for the last 3 years.

LA YS does not intend to establish an adversarial role with the medical Vendor; however some baseline damages must be in place to ensure compliance with the contract. The Vendor may be assessed liquidated damages in the RFP for failing to meet contract requirements.

9. Page 74, section 3.2 – Will the OJJ consider allowing vendor termination for convenience or annual contract renewals by mutual agreement?

Annual contract renewals are by mutual agreement, and it is unlikely that vendor termination for convenience would be allowed.

10. Please share the names of potential vendors that participated in the site tours March 11-12, 2010.

Please refer to the questions and answers posted for stationery that reflects each vendor that participated in the site tours March 11 – 12, 2010.

CURRENT EXPENDITURES:

11. Please provide both your annual budget and actual expenditure data for medical services, in as much detail as possible, for the past 2 years.

During the fiscal year July 1, 2008 – June 30, 2009, approximately \$10,805,181.29 was expended for medical and mental health services. Since that time, YS has experienced a significant decrease in the population at both BCCY and JCY. Therefore, the agency is interested in budget plans that will provide cost efficient quality healthcare services at the current population level indicated in the RFP.

12. Are there any costs included in your budget and cost data which will not be included in this contract (i.e. security and transportation costs)? If so, what items, and what is the annual budget and/or cost?

Question is not clear; please refer to the scope of services for budget cost and planning.

13. Are there any costs not included in your budget and any cost data that will be included in this contract? If so, what items, and what is the annual budget and/or cost?

Repeat Question

14. Does the Department of Health and Hospital (DHH) fund any of the current on-site or off-site medical expenses currently provided under the existing agreement? If so, please provide a list of funded services.

According to LA RS 15:831 youth in the secure care facility may receive medical services in the Charity Hospital System. For more information with understanding the Louisiana State University Hospital System, please refer to the LSUHCSC Hotline 1-866-431-4571 or <https://www.lsuhs hospitals.org>.

Any healthcare services not covered by the charity hospital system, is the responsibility of the healthcare provider.

15. Please provide the off-site utilization cost detail for both charity hospitals, and all other offsite providers for the last two years.

This information is not available.

CONTRACT STRUCTURE:

Answer to Questions 16 – 19:

YS welcomes cost savings recommendations from proposers as alternative price structuring that reduces costs while maintaining quality healthcare standards. A proposer may submit more than one cost proposal for services. If an alternative price structure other than as it is outlined in the RFP, it shall be treated separately during the evaluation process. Please refer to p. 20 and 21 of the RFP. Section 5.7, Cost.

16. Will the OJJ accept fixed monthly reimbursement with a variable population per diem?
17. Will the OJJ accept a floor when calculating the 10% incremental population decreases?

18. Will the OJJ accept a performance guaranty in lieu of a performance bond?
19. For purposes of calculating a per diem, please explain how the OJJ plans to calculate ADP (e.g. – population on last day of the month, monthly average, actual population on each day of the month, other.)
20. Our understanding is that ACA accreditation is a jail standard with a medical component, correct? Per Page 87 - How does the OJJ propose for vendors to include that cost into our per diem? Are vendors to include the entire cost or just an allocation for medical? If an allocation is made, will the OJJ please provide that number?

Fees will be assessed according to the medical component of the ACA juvenile performance based standards for Juvenile Correctional Facilities, 4th Edition. Currently, that fee is \$6,075.00.

21. Who is financially responsible for the payment of inpatient and outpatient claims for off-site services at both charity hospitals and other offsite providers?

According to LA RS 15:831, youth in the secure care facility may receive medical services in the Charity Hospital System. For more information with understanding the Louisiana State University Hospital System, please refer to the LSUHCSC Hotline 1-866-431-4571 or <https://www.lsuhs hospitals.org>.

Any healthcare services not covered by the charity hospital system, will be the responsibility of the healthcare provider.

SPACE, EQUIPMENT AND SUPPLIES:

22. Please provide a list and frequency of medical care clinics that are provided on-site.

YS and the new healthcare provider will decide jointly.

23. Please provide an existing equipment inventory for the Medical unit/Infirmary, Dental area, Optometry area, Auditory area, Pharmacy area, X-Ray area, Telemedicine area, and EKG equipment. Will all current equipment be made available at no charge to the contractor? If not, at what cost will the vendor be allowed to purchase the existing equipment?

Please refer to the equipment list posted. All equipment owned by YS is available for the healthcare providers' use, and must receive quality assurance and regular maintenance as required by the healthcare provider.

24. Page 41 – How many Automatic External Defibrillator (AED) Devices are there now? Where are they located?

Currently, there is one AED per facility located in the infirmary.

25. Will the existing inventory of medical supplies (including med carts) be available at no charge to the contractor at the beginning of the contract? If not, will the vendor be expected to purchase the supplies? At what cost will the vendor be allowed to purchase medical supplies?

The existing medical supplies will not be charged to the new healthcare provider. Per the RFP the vendor will be responsible for the cost of medical supplies for the duration of the contract.

PHARMACY:

26. Please provide the most recent 12 months of drug utilization.

A list of the top 20 most utilized drugs is posted.

27. Please provide a copy of the current formulary, and the procedure for ordering medication off formulary?

Currently, YS does not have an approved formulary for distribution.

28. What is the average number of prescriptions per youth/per year for the past 3 years?

Unfortunately, this information is not available.

29. What was the total cost for pharmaceuticals in each of the last 3 years? What population size did those costs cover?

Total Pharmacy costs for pharmaceuticals during fiscal year July 1, 2008- June 30, 2009 = \$223,441.77. This does not include staff or supplies.

30. How much of the total annual pharmaceutical costs were for HIV medications?

This information is not available separately.

31. How much of the total annual pharmaceutical costs were for psychotropic medications?

A breakdown of costs for psychotropic medications only is not available.

32. How many medication passes are done each day?

3 – 4 per day.

33. Page 42 – Re: Hepatitis B vaccine, is the Vendor financially responsible to purchase the vaccine and administer it to all YS employees, if so how many employees are there? What was the cost of administering this program per year, for the last 2 years?

Gwen, this service was not previously provided.

FORMS:

34. Will vendor be responsible to supply all forms? Will some forms be required by OJJ?

Paper forms should be developed electronically and presented for approval by YS Health Authority. However, additional forms guided by policies will be required and provided by the agency.

HIV & TB TESTING:

35. Does the State of Louisiana mandate HIV testing?

HIV testing is considered a part our routine care in the state of Louisiana, please refer to LA RS 40:1300.13, and the CDC guidelines for HIV Prevention, <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>.

36. How many youths are diagnosed with HIV? How many are currently on HIV medications?

One as of the last quarterly report.

37. Page 33, section B – contractors physician must test for HIV. Is this being currently being done by blood draw or buccal swab?

Rapid HIV Testing is available in the state of Louisiana with testing methodologies to include finger pricks or oral swab in addition to conventional blood draws.

38. How many OJJ staff members receive annual TB testing?

YS would like to move in the direction to implement annual TB skin testing with the new healthcare provider for its employees.

39. Does the state of Louisiana require specialized training of medical personal that do pre test and post test HIV counseling?

Rapid HIV testing trainings are available through the Louisiana Office of Public Health HIV/AIDS Program.

INTAKE:

40. If nurse questions possible alcohol/drug abuse, are youth sent to the ER for clearance?

No, youth are not routinely sent to the ER for answering positively to a questionnaire.

STAFFING:

41. Please provide:

- The current facility staffing matrix by position, day, and shift.
- Current salaries (or salary ranges) for each employee.
- Information regarding the current fringe benefits package including paid leave, insurance, retirement plan, and any other non-salary items.

This information is maintained by the current healthcare provider. It is not available to YS at this time.

42. Is there an H.S.A. or Regional Manager for each site or will one be enough for the two sites?

YS may require oversight by a qualified health administrator at each facility.

43. Does the OJJ want to increase or decrease staffing?

As outlined in the RFP, YS OJJ is interested in providing cost effective quality healthcare services. Staffing plans should demonstrate the most efficient way to deliver the services referenced in the RFP.

44. What positions are currently vacant?

This information is maintained by the current healthcare provider. It is not available to YS at this time.

45. Staff Retention – How long has current staff been at each facility? What is the average length of employment?

The current healthcare provider maintains their employee information.

46. Will the vendor be expected to retain any or all employees?

At this time, YS cannot offer any recommendations for recruitment.

47. What is the percentage of staffing turnover and what discipline appears to have the greatest turnover?

YS does not maintain any employee information for the current healthcare provider.

48. Is the current vendor using any agency nursing staff and/or locums to fill positions? If so how many positions are being filled with agency and/or locums? If so, how many are being filled, and what days and shifts?

Please see the answer to #47.

49. Has there been difficulty recruiting RNs, LPNs or other professional staff?

Please see the answer to #47.

50. Are any of the current medical employees covered under civil service, labor union, or other wage agreements? If so, identify the organizing body, contact person, employees affected, required salary and benefit ranges, and a copy of the agreement.

Please see the answer to #47.

51. What pre-screening of employees is required: fingerprinting, drug screening, rubella and measles, others?

Employers should follow Louisiana Laws and national standards for credentialing and pre-screening all medical and healthcare professionals at correctional facilities.

52. What is the level of involvement of state or parish employees providing services through grants, independent agreements or any related areas?

This question cannot be answered the way it is written.

PROVIDERS:

53. Please supply a list of the current vendors providing the following services at both sites: Lab, X-ray, Optometry, Auditory, and Dental?

Labcorp is currently providing lab services. According to LA RS 15:831 youth in the secure care facility may receive medical services in the Charity Hospital System. For more information with understanding the Louisiana State University Hospital System, please refer to the LSUHCSC Hotline 1-866-431-4571 or <https://www.lsuhs hospitals.org>.

54. Please provide names of hospitals & other primary provider/specialists used for youth care today.

Please see the answer to #53.

55. What portion of your current medical program is subcontracted to outside providers, hospitals or government agencies? Please list the providers, the services provided, and include a copy of your contracts and/or agreements with each of them.

That information is maintained by the current healthcare provider.

56. Is charging Medicaid for the youths off-site medical care an option?

Please review Louisiana Medicaid regulations at <http://www.lamedicaid.com/provweb1/default.htm>.

57. Pg. 19, section 5.6 – In addition to the list of approved Small Entrepreneurship participants that was provided in the RFP, will the OJJ also supply a list of SE's being used by the provider under the current contract?

Please see the answer to #55.

58. Please provide details of how the state's charity hospital system functions. More specifically, does the state pay the claims directly to the hospital? If a different methodology is being used, please describe.

YS does not receive invoices from the charity hospital system.

59. Who is financially responsible for off-site services provided within the charity hospital system?

The state of Louisiana.

SERVICES:

60. Are there any state laws or pending legislation that would impact reimbursement to hospitals and other outside medical providers? If yes, please describe.

YS cannot speculate on pending legislation that would impact reimbursement to hospitals or medical providers. Please refer to the Louisiana Hospital Association and Louisiana Medicaid for additional information regarding reimbursement issues.

61. Please provide a copy of the current health services agreement.

We received several requests for OJJ's current contract for these services. Please be advised that the agreement with LSUHSC was entered into approximately ten years ago and came about during efforts to end federal litigation. It is more similar to an interagency agreement than to a contract between parties. As a teaching school LSU's interests and mission are different than those of private business and are reflected in contract costs. Prospective bidders should not rely on the monetary amount of the LSU contract in determining their budget. OJJ is seeking a contractor who can deliver an efficient, cost-saving model of delivery of health care services.

A copy of the current health services contract posted.

62. Please provide a copy of current health services agreements for any other OJJ Facilities in Louisiana (other than the BCCY and JCY).

Please refer to Louisiana Public Records Act LAR.S.44:32 and submit a formal written request for copies of these documents, copying fees may apply.

63. Page 49, Health Education – Providers will be responsible for staff education of subjects listed including CPR? Please provide the average number of staff per year.

Currently, there approximately 152 staff members at JCY, and 175 at BCCY, periodic staff in-services are what is referred to here. OJJ staff has a separate CPR course for its staff.

64. Page 58, Employee Health, Pre-employment physicals – For whom, specifically, would these be performed?

New employees and food service workers.

65. Please provide the number of eyeglasses issued over the past 12 months.

All youth admitted into the secure facilities receive eye screenings. Eyeglasses are provided to youth that require them. The exact number issued is not readily available.

mortality rate:

66. Any youth deaths in the last 3 years?

One, two years ago without any judgments against YS OJJ.

STATISTICS:

67. Please provide monthly or annual on-site, off-site, and population statistics in the following categories for the past 3 years:

Average Daily Population	Average Intakes (Screenings)	Health/Physicals
Nurse Sick Call Visits	MD/PA Sick Call Visits	Youths on HIV Meds
Youths on Psychotropics	Youths on Prescription Meds	Pregnant Youths/Deliveries
X-rays – on-site	Dental Visits	Mental Health Visits
Infirmiry Admissions	Infirmiry Days	Average Infirmiry Census
Inpatient Hospital Days	Inpatient Hospital Admissions	Emergency Room Visits
Ambulance Transports	Dialysis Visits	Outpatient Surgeries
Outpatient Specialty Visits	Outpatient Radiology Visits	Other Outpatient Referrals (Specify)
Youths on Hep C medication	Youth Suicide Attempts	ER Visits resulting in Admission

Currently, at least 30% of the population at BCCY, and approximately 48% at JCY are taking psychotropic medications.

Unfortunately at this time we do not have an electronic management system to capture and report this information succinctly and timely. It is our intent to move in this direction with the new healthcare provider. A copy of the most recent quarterly reports, October – December 2009, is posted to give proposers a snapshot of healthcare data that represents our current population.

LITIGATION:

68. Please provide a list of your current litigation or loss run.

YS has no consent decrees or lawsuits currently pending.

69. Have there been any settlements in the past 3 years?

No

MENTAL HEALTH:

70. What mental health services are currently available both on-site and off-site? Please explain.

Mental health services include but is not limited to screenings, assessments, diagnosis, treatment, cognitive and behavioral therapy, substance abuse treatment, individual and group therapy. These services should be made available on-site.

71. What is the average number of youths receiving mental health services?

Currently, at least 30% of the youth at BCCY, and approximately 48% at JCY are receiving mental health services.

72. What is the number of inpatient (state hospital) psychiatry days in each of the past 3 years?

This information is not available.

73. What is the procedure for inpatient mental health confinement of a youth outside of the facility? Who pays for this?

Please review the policies and information provided by the Louisiana Department of Health and Hospitals Office of Mental Health at <http://www.dhh.louisiana.gov/offices/page.asp?ID=62&Detail=3547>.

ACCREDITATION:

74. Page 10, section 3.1 – Would the OJJ consider allowing the vendor to make the determination if the OJJ is ready for ACA accreditation within 7 months?

No

75. Is the OJJ currently ACA accredited? Are there any other state regulatory or accrediting bodies involved?

YS is currently seeking ACA accreditation.

76. Are the current facilities currently NCCHC accredited? If yes, what is the next survey date? If not, is accreditation desired?

No

77. Please supply copies of all facility audits and accreditation reviews done in the last 3 years.

Not applicable.

GENERAL:

78. What is the average length of stay at each facility?

BCCY – 166 days, JCY – 173 days.

79. Please provide a copy of all of the following that currently exist, and detail whether they will apply to the contractor:

- Medical policy and procedure manual

Policies and procedures for YS OJJ's healthcare delivery system will be developed jointly by the OJJ Health Authority and the new healthcare provider.

- State or local regulations relating to health care provided in the facility
- Youth fee-for-service (co-pay) policy

YS secure care facilities do not charge a co-payment.

- Court orders or consent decrees for the facilities

Currently, there are no consent decrees or lawsuits.

- Monthly activity, statistical, and management reports prepared for health care services

See the list of recent quarterly reports posted.

- Samples of forms utilized in the delivery of care (intake screening, sick call, etc.)

See example of forms posted.

80. Will you please provide information about your detox protocol?

Currently, YS does not provide detox services.

81. Does the OJJ charge youths for health care such as sick call and prescriptions?

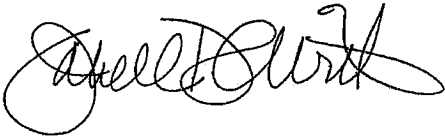
No

82. What do Louisiana state laws dictate regarding supervision? For example, can an LPN/LVN work independently?

LPNs are allowed to practice within the scope of their practice according to the Louisiana State Board of Practical Nurse Examiners.

Thank you for your consideration and the opportunity to build a successful partnership in correctional healthcare. We appreciate the OJJ answering our questions so that we may gain a complete understanding of your objectives and submit a win-win proposal.

Best Regards,



Janell DeWitt
Proposal Project Manager - PHS, Inc.
615.376.0658 phone | 615.376.1350 fax
dewittjd@asgr.com

NAME	DATE OF BIRTH/AGE	RACE/SEX	JIRMS NUMBER	DATE OF ADMISSION
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PART 2 – PHYSICAL HEALTH SCREENING**VISUAL OBSERVATIONS**

- YES NO 1. Does the youth have impaired alertness?
- YES NO 2. Does the youth have obvious pain or bleeding or other symptoms suggesting a need for emergency care?
- YES NO 3. Are there visible signs of trauma or illness requiring immediate emergency or doctor's care?
- YES NO 4. Is there obvious fever, swollen glands, jaundice, or other evidence of infection that might spread through the facility?
- YES NO 5. Is there a significant rash or other skin abnormalities on the body that warrant immediate attention?
- YES NO 6. Are there signs of body vermin/infestation?
- YES NO 7. Are there signs of intravenous drug use?
- YES NO 8. Does the youth appear to be under the influence of alcohol or other drugs?
- YES NO 9. Are there visible signs of alcohol or drug withdrawal symptoms?
- YES NO 10. Does the youth show signs of tremor or sweating?
- YES NO 11. Are there bruises or other trauma markings? (Note location and type in Body Markings Section)
- YES NO 12. Does youth have a recent tattoo (redness, bleeding, swelling)? (Note location in Body Markings Section)
- YES NO 13. Does the youth have any obvious physical disabilities or body deformities?
- YES NO 14. Is the youth's movement restricted?

If yes, Comments: _____

HEALTH STAFF – YOUTH QUESTIONNAIRE

- YES NO 1. Have you ever been told you have diabetes, heart disease, arthritis, AIDS, asthma, ulcers, high blood pressure, hepatitis, TB, history of positive PPD, seizures, epilepsy, sexually transmitted disease? (Circle any to which the youth answers yes).
- YES NO 2. Are you currently on a diet ordered by a doctor? [] low salt [] weight loss [] diabetic [] prenatal [] other
- YES NO 3. Are you allergic to any medication, food, other substance? If yes, what happens when you take it or are exposed to it? Anaphylaxis? [] Yes [] No [] Unknown
- YES NO 4. Have you been treated for a medical problem in the last 6 months? Where? When? Why?
- YES NO 5. Are you having bad headaches, numbness in any part of your body, or changes in your vision or memory?
- YES NO 6. Do you have a continuous cough?
- YES NO 7. Do you bring up blood or phlegm when you cough?
- YES NO 8. Do your teeth or gums hurt?
- YES NO 9. Have you had unsafe sex with someone you know has the AIDS virus?
- YES NO 10. Have you had multiple sex partners?
- YES NO 11. Have you had sex with a boy/girl? (use same sex as youth)

For Females:

- YES NO 12. Are you pregnant? No. of months: _____
- YES NO 13. Have you delivered recently? Date: _____
- YES NO 14. Are you on birth control pills?
- YES NO 15. Do you have gynecological (female) problems?

If yes, Comments: _____

CURRENT COMPLAINTS: _____

MEDICATIONS

What medications are you taking now or were taking right before being locked up? Why were you taking the medication? Was the medication brought to the facility?

Medication	Dosage	Why taking	Taking now	Taking before locked up	Brought to the facility

BODY MARKINGS SECTION

Left = L
Right = R

Upper = U
Front = F

Position Designations:

Lower = LW
Back = B

Inner = I
Outer = O

Head = HD
Scalp = SC
Neck = N
Shoulder = SH

Elbow = E
Arm = A
Wrist = W
Palm = P
Hand Back = H
Fingers = F1 – F5

Body Part Designations:

Chest = C
Back = B
Ribs – R
Abdomen = AB
Buttocks = BT

Thigh = T
Knee = K
Shin = SN

Ankle = AK
Foot = F
Sole = FS
Toes = T1 – T5

Body Markings:

	Position	Body Part	Description
<input type="checkbox"/> Tattoo <input type="checkbox"/> Scar <input type="checkbox"/> Wound <input type="checkbox"/> Burn	_____	_____	_____
<input type="checkbox"/> Tattoo <input type="checkbox"/> Scar <input type="checkbox"/> Wound <input type="checkbox"/> Burn	_____	_____	_____
<input type="checkbox"/> Tattoo <input type="checkbox"/> Scar <input type="checkbox"/> Wound <input type="checkbox"/> Burn	_____	_____	_____
<input type="checkbox"/> Tattoo <input type="checkbox"/> Scar <input type="checkbox"/> Wound <input type="checkbox"/> Burn	_____	_____	_____
<input type="checkbox"/> Tattoo <input type="checkbox"/> Scar <input type="checkbox"/> Wound <input type="checkbox"/> Burn	_____	_____	_____
<input type="checkbox"/> Tattoo <input type="checkbox"/> Scar <input type="checkbox"/> Wound <input type="checkbox"/> Burn	_____	_____	_____
<input type="checkbox"/> Tattoo <input type="checkbox"/> Scar <input type="checkbox"/> Wound <input type="checkbox"/> Burn	_____	_____	_____

DISPOSITION

- ☐ General Population
☐ General Population with Referral to MD/PA/NA or DDS
☐ Immediate Referral to MD On Duty/Call
☐ Other: _____

Disposition is based on my review of Part 1 – Mental Health Screen as well as the Physical Health Screening I have conducted:

Signature/Professional Initials of Nursing Screener _____

Date Completed _____

Time Completed _____

Signature of Physician Reviewer _____

Date Reviewed _____

Annual Physical Exam

Facility:

History:
History:

Allergy:

Vital Signs:

Exam:

General appearance:

Skin:

Comments:

Comments:

Acne:

Head:

Eyes:

Ears

Nose:

Throat

Neck:

Chest:

Breast:

Lungs:

Heart:

Abdomen:

Genitalia (male):

Circumcised:

Tanner PH:

Tanner GENT:

Circumcised:

Tanner PH:

Tanner GENT:

Neurological:

Musculoskeletal:

Back:

Rectal: deferred; deferred;

Comments: no complaints; no complaints;

Comments: no complaints; no complaints;

Assessment:

Diagnosis:

692.9 DERMATITIS NOS Active

V70.0 ROUTINE MEDICAL EXAM Active

Treatment:

Comments: Cerave Lotion; Cerave Lotion;

Comments: Cerave Lotion; Cerave Lotion;

Laboratory (Routine test): 5; 5;

Immunizations:

Youth Education: Yes; Yes;

Disposition: Release to GP; Release to GP;

Duty Status: Full; Full;

Cleared for Kitchen Duty; Cleared for Kitchen Duty;

ESignature

Title:

Date Signed:

Time Signed:

Pharmacy Top 20 Drug List (Most frequently ordered medications).

Diphenhydramine 12.5mg/5 ml

Hydroxyzine HCL 10mg/5 ml

Boost

Chlorhexidine Gluconate 0.12%

Melatonin 3mg Tab

Guaifenesin DM 1 mg Tab

Loratadine 10mg Tab

Acetaminophen – ES 500mg

Guanfacine 1mg Tab

Naproxen 500mg Tab

Trazadone 100mg Tab

Ibuprofen 20/mg/ml Susp

Citalopram 20mg Tab

Ibuprofen 20mg/ml Susp

Acetaminophen 325mg

Fluoxetine HCL 20mg

Trazodone 50mg Tab

Amitriptyline 10 mg Tab

Clonidine HCL 0.1mg Tab

**CONTRACT BETWEEN
LOUISIANA OFFICE OF YOUTH DEVELOPMENT OF PUBLIC SAFETY AND
CORRECTIONS
AND
BOARD OF SUPERVISORS OF LOUISIANA STATE UNIVERSITY AND
AGRICULTURAL AND MECHANICAL COLLEGE ON BEHALF OF ITS
LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER-NEW ORLEANS
(LSUHSC-NEW ORLEANS)
CONTRACT # _____**

1) MAILING ADDRESS: 433 Bolivar Street	2) CITY, STATE, ZIP CODE: New Orleans, LA 70112
3) FEDERAL TAX I.D. NUMBER OR SOCIAL SECURITY NUMBER: 72-6087770-38	
4) Mailing Address for Notice/Correspondence: Chancellor, LSUHSC, 433 Bolivar Street, New Orleans, LA 70112	Mailing Address for Payments to LSUHSC: Office of Sponsored Projects, 433 Bolivar Street New Orleans, LA 70112

5) DESCRIPTION OF SERVICES TO BE PROVIDED: Services to be provided, and additional terms and conditions of this Contract between Louisiana Office of Youth Development of Public Safety and Corrections ("Youth Services"), and Louisiana State University Health Science Center, New Orleans ("LSUHSC-New Orleans") are as follows:

a. Purpose of Contract:

(i) Youth Services operates Jetson Center for Youth ("JCY"), the Bridge City Center for Youth ("BCCY"), and Swanson Center for Youth (herein "Swanson" or "SCY") as secure juvenile facilities for housing juveniles adjudicated delinquent and placed in the custody of the state. (JCY, BCCY and Swanson are sometimes collectively referred to as the "Secure Facilities").

(ii) Youth Services is charged with assuring that juveniles placed in Secure Facilities receive adequate medical, dental and mental health services. LSUHSC-New Orleans will provide medical, nursing, mental health, dental and related services described in this contract (sometimes referred to as "Health Services") for juveniles housed at JCY and BCCY. If increases in the youth population or any other factors would prevent LSUHSC-New Orleans

from providing these Health Services within existing budget categories (contract services capacity based on youth census of 195 at JCY and 95 at BCCY) , then LSUHSC-New Orleans shall be obligated to provide such Health Services only to the extent that LSUHSC-New Orleans and Youth Services amend this contract and, if necessary, make additional funds available to pay LSUHSC-New Orleans for such Health Services.

(iii) The School of Public Health Juvenile Justice Program Director of LSUHSC-New Orleans ("Program Director") shall be responsible for implementing LSUHSC-New Orleans obligations under this contract. Rhonda Kendrick currently serves as the LSUHSC-New Orleans Program Director. The Deputy Secretary of Youth Services (the "Deputy Secretary") shall be responsible for implementing Youth Services' obligations under this contract. Simon Gonsoulin currently serves as the Youth Services Deputy Secretary.

b. Responsibilities of LSUHSC-New Orleans:

In addition to any other obligations of LSUHSC-New Orleans set forth in this Contract:

(i) Health Care Professionals, Licensure. LSUHSC-New Orleans shall provide the qualified medical doctors, nurses, dentists, psychologists, social workers, technicians and such other support personnel necessary to provide the services described in this Contract. All health care professionals assigned to provide Health Services under this Contract shall hold appropriate Louisiana licenses, or will have appropriate licensed supervision as allowed under Louisiana Law.

(ii) Health Services. LSUHSC-New Orleans, LSUHSC-Shreveport, and Youth Services shall jointly develop a written program that includes comprehensive medical, nursing, mental health and dental services throughout the secure system (the "Health Services"). All youth will have timely and direct access to qualified professionals for emergency and scheduled routine medical, nursing, mental health and dental services that meet all applicable nationally recognized standards of care. "Health Services" shall include, at a minimum:

MEDICAL CARE SERVICES

Medical Intake

- Screening and Assessment
- Limited, Select Intake Services for Female Secure Care Juveniles at JCY

Practitioner Clinics

- Ongoing Care
- Chronic Illness Clinics
- Specialty Clinics
- Acute Care Services
- Telemedicine Clinics

Infirmiry Wards

Specialty Referral Services

NURSING SERVICES

Nursing Care including outpatient and ward nursing assessments

Pill Call

Medication administration reporting and review

Patient education and instruction

DENTAL CARE SERVICES

Screening and Assessment

Annual Examinations

Acute Care Services

Specialty Referral Services

MENTAL HEALTH SERVICES

Mental Health Intake

- Screening and Assessment

Mental Health Treatment of Seriously Mentally Ill (SMI) Youth

Substance Abuse Treatment Programming

- Substance Abuse Assessment Services
- Treatment of SMI and non-SMI youth at BCCY
- Treatment of Co-Occurring Youth at JCY

Sexual Offender Treatment Programming

- Sexual Offender Assessment Services
- Treatment of Co-Occurring Youth at BCCY and JCY

Consultation Services

Suicide Precautions

Clinical Recommendations for Transfer of SMI Youth

- Non-Youth Services Facility Sites
- Youth Services Secure Facilities inclusive of SCY Specialty Units

LSUHSC-New Orleans will provide these Health Services at JCY and BCCY, as well as select Health Care services for "secure" custody females at JCY.

(iii) Health Care Policies. LSUHSC-Shreveport and LSUHSC-New Orleans jointly will develop the Youth Services/LSUHSC Health Care Policies for medical, nursing, mental health, dental and related services to be followed at all Youth Services secure juvenile facilities

269388.13

(the "Joint Health Care Policies"). These Joint Health Care Policies shall be adopted by LSUHSC-New Orleans within 90 days of the signing date of this Contract. The Joint Health Care Policies shall govern the delivery of Health Services at JCY and BCCY unless LSUHSC-New Orleans identifies and articulates, in writing, a basis for the adoption of separate protocols for particular health care services and specialty programs within JCY and BCCY.

(iv) Quality Assurance and Monitoring. Youth Services requires a uniform and consistent quality assurance, data collection, and monitoring program throughout its secure juvenile system. LSUHSC-Shreveport, LSUHSC-New Orleans and Youth Services jointly shall develop, revise and adopt uniform quality assurance, data collection, and monitoring programs, manuals and other materials for use within all Youth Services secure facilities within 90 days of the signing date of this contract. These quality assurance, data collection, and monitoring programs, including related materials, are referred to hereafter as the "Youth Services Quality Assurance Program".

The Youth Services Quality Assurance Program shall be a comprehensive quality assurance program that supports evidence based practice and nationally recognized standards of care. This program shall be responsible for continuous quality improvement and monitoring of medical, nursing, mental, and dental health services at the Secure Facilities. The program shall collect and analyze quality assurance data, initiate the problem solving process for areas of concern, compile and produce a Quality Report, and continually review and maintain best practices literature regarding juvenile healthcare at Secure Facilities.

The Youth Services Quality Assurance Program shall provide for on-site Quality Assurance Specialists ("QA Specialists") responsible for coordinating procedures for implementation of the Program. The QA Specialists shall conduct monitoring activities at the facility, and communicate with facility staff regarding program evaluation activities and findings.

The Youth Services Quality Assurance Program shall manage, extract, analyze, and report on medical and mental health data generated by LSUHSC-Shreveport and LSUHSC-New Orleans clinical services. Data shall be provided upon request with sufficient advance notice for the purposes of program development, program evaluation, regular reporting, and other OYD identified needs.

In accordance with federal and state law and regulations, Youth Services will provide to LSUHSC-New Orleans all information in its possession that may be necessary for LSUHSC-New Orleans to develop, conduct, report and document quality assurance and monitoring as necessary in order to meet the terms and conditions of this Contract and as required by LSUHSC-New Orleans for the provision of Health Services hereunder, in accordance with protocols adopted by LSUHSC-New Orleans and Youth Services. Subject to federal and state law and regulations, LSUHSC-New Orleans will provide to Youth Services all information in its possession that may be necessary for Youth Services to conduct any quality assurance/program evaluation.

LSUHSC-New Orleans will supervise QA specialists, administer and provide quality assurance, continuous quality improvement and monitoring for all Health Services it provides for juveniles residing at JCY and BCCY in accordance with the Youth Services Quality Assurance Program.

(v) Training. Youth Services requires a uniform and consistent training program for staff throughout its secure juvenile system. LSUHSC-Shreveport, LSUHSC-New Orleans and Youth Services jointly shall develop, revise and adopt uniform training programs, manuals and other materials for use within all Youth Services secure facilities within 90 days of the signing date of this contract. These training programs, including manuals and related materials, are referred to hereafter as the "Youth Services Training Program". The intellectual property rights of each party shall be appropriately referenced on all such training materials. The Youth Services Training Program to be developed by LSUHSC-Shreveport and LSUHSC-New Orleans shall provide ongoing education, instruction and skills enhancement on topics related to working within Secure Facilities and in the areas of knowledge necessary to care for this specific population of youth involved with the juvenile justice system.

The Training Program will provide Youth Services staff pre-service, in-service, and specialty training on healthcare and mental healthcare related topics and associated field observation/training (aka: TIP/Training in Place). LSUHSC-New Orleans shall make available continuing professional education and other programming to clinical staff to assist with the maintenance of licensure requirements.

LSUHSC-New Orleans will supervise training specialists, administer and provide identified training programs for staff at JCY and BCCY in accordance with the Youth Services Training Program.

(vi) Telemedicine. LSUHSC-New Orleans shall provide telemedicine equipment and programming for training, administrative conferencing and clinical support services at JCY and BCCY that shall enable LSUHSC-New Orleans and Youth Services to accomplish at least the following via telemedicine:

- The Telemedicine Program shall provide high-speed video linkages between and among the Secure Facilities and identified healthcare institutions which will allow inter-facility healthcare and educational services.
- The network will be built upon network infrastructure that can support the simultaneous demand of multiple clinical, educational, and administrative conferences between any combination of sites in both average and peak usage periods. In addition, adequate capacity of bandwidth will be built in to meet the anticipated short and long-term needs of LSUHSC staff at the Secure Facilities.
- The Telemedicine Program will permit the administration of high quality selected medical and mental health services to patients at all Secure Facilities. Staff at the Secure Facilities will have the ability to point and click video conference calls that will connect them to healthcare providers at affiliated facilities, where deemed clinically appropriate.

- Each facility will have high-resolution telemedicine systems with dual monitors, clinical quality patient cameras, document cameras for remote viewing of patient charts, and specialized attachments to permit remote physical examinations.

LSUHSC-New Orleans will provide overall program management and oversight of telemedicine at JCY and BCCY.

(vii) Electronic Health Record. Youth Services requires a uniform and consistent electronic health record ("EHR") that will be accessible to Youth Services, LSUHSC-Shreveport, LSUHSC-New Orleans and, as appropriate, other health care providers, third parties that participate in the provision of related Health Services for juveniles in the Secure Facilities. LSUHSC-Shreveport, LSUHSC-New Orleans and Youth Services agree to work cooperatively toward implementing a system wide EHR that can be used by Youth Services, LSUHSC-Shreveport and LSUHSC-New Orleans. Within 180 days of the signing date of this Contract, parties will jointly identify and select a software program (such as Allscripts, NexGen, or Gentech), and shall develop a schedule for implementing that program as soon as reasonably practical. A secure computerized record will be established for each juvenile residing in the Secure Facilities. The EHR will be available system-wide to LSUHSC-New Orleans, LSUHSC-Shreveport, and to OYD personnel responsible for data analysis and reporting, direct care, overseeing the provision of care, and for referrals to appropriate healthcare institutions.

The EHR will include, but not be limited to treatment plans, problem lists, immunization and health screening schedules, and rationale for decisions supporting the delivery of timely and appropriate services. The EHR shall be maintained in accordance with HIPAA guidelines for privacy and security.

The EHR will serve as a longitudinal medical record for youth at the Secure Facilities, housing data on baseline medical, mental health and dental examinations, problem lists, medication lists, immunization status and acute medical and mental health encounter data. The EHR will utilize a web browser-based or other software specific clinical user interface accessible via secure intranet. The EHR will be linked via IP communication and capable of exchanging data with the OYD Youth Services case management record database/application. Through consultation with the LSUHSC-New Orleans Office of Computer Services, LSUHSC-New Orleans will compile and manage medical information through the EHR, will develop and maintain a linkage for a unified electronic case record, and maintain the necessary independent server for youth medical and health information. LSUHSC-Shreveport, LSUHSC-New Orleans and Youth Services shall develop the capacity for secure direct accessibility of Youth Services, LSUHSC-New Orleans and LSUHSC-Shreveport staff to information in the EHR and Youth Services case management record as appropriate to perform duties in the shared care and treatment of the youth in the custody of Youth Services. LSUHSC-Shreveport, LSUHSC-New Orleans and Youth Services will establish security procedures mutually acceptable for the shared access. OYD will provide funding for the acquisition and maintenance of the Electronic Health Record.

(viii) LSUHSC-Shreveport, LSUHSC-New Orleans, and Youth Services jointly shall develop and adopt a written protocol to govern the clinical recommendations for transfers of juveniles between the Swanson mental health unit, the Swanson mental health transition unit,

and Jetson and BCCY. This protocol shall be approved by, Youth Services and must be accepted, in writing by LSUHSC-New Orleans, and this protocol can be revised only upon written agreement of LSUHSC-Shreveport, LSUHSC-New Orleans, and Youth Services. Youth Services will provide a written protocol to govern the administrative process for transfers of juveniles between SCY inclusive of the mental health treatment unit and the mental health transitional unit, JCY and BCCY. This mental health transfer protocol shall be adopted and implemented within 90 days of the signing date of this Contract.

(ix) Changes in Staffing Plans. LSUHSC-New Orleans reserves the right to change staffing plans based on the needs of the programs and the youth being served as long as such changes do not result in additional costs to Youth Services; provided, however, that LSUHSC-New Orleans will not make any changes in staffing plans that would significantly alter or reduce the Health Services as described in this Contract unless LSUHSC-New Orleans has received the prior written approval from the Deputy Secretary of Youth Services. LSUHSC-New Orleans will not be obligated to provide any new services or programming that would cause LSUHSC-New Orleans to incur costs in excess of the budget for this Agreement. If new or additional services or programming would exceed the budget for this Agreement, then those services and programs will be provided only pursuant to a further amendment to this Agreement.

(x) LSUHSC-New Orleans is responsible for the management of a single local area network (LAN) within JCY and BCCY. Youth Services and LSUHSC-New Orleans will jointly develop a plan for communicating and resolving facility level IT issues between the parties. LSUHSC-New Orleans will continue to operate its own network as a separate system outside JCY and BCCY, and Youth Services agrees that LSUHSC-New Orleans's network will be secured against access by Youth Services and others.

c. Responsibilities of Youth Services:

In addition to any other obligations of Youth Services set forth in this Contract or exhibits hereto,

(i) Notwithstanding anything to the contrary in this Contract, Youth Services shall provide office space, space for equipment, and space to house the programs and personnel required by LSUHSC-New Orleans to perform this Contract and necessary to ensure appropriate assessment, diagnosis and treatment of juveniles at JCY and BCCY. Youth Services acknowledges and agrees that LSUHSC-New Orleans can not provide services without adequate office space. All space at JCY and BCCY shall be properly prepared to accommodate computer and other equipment necessary to implement the programs described in this Contract

(ii) Equipment: For the purpose of this contract, equipment purchased with state funds shall mean any item with a useful life of at least one (1) year and an acquisition cost of at least one thousand dollars (\$1,000) or more. It is specifically agreed and understood that funds established under this agreement shall be limited in use to equipment purchased as per the LSUHSC-New Orleans approved budget. Upon destruction or theft due to negligence during

the term of the contract, LSUHSC-New Orleans shall replace said equipment with new equipment of a quality equal to the original equipment.

Any amendment to the approved budget, that authorizes expenditures for equipment, shall be approved in writing by the Chief Fiscal Officer prior to the purchase of such equipment. Equipment or capital assets acquired by LSUHSC-New Orleans pursuant to this agreement shall be used only for the performance and furtherance of this contract. It is also understood that all equipment, including replacements, shall be considered to be the property of LSUHSC-New Orleans for the duration of the contract and shall be claimed by Youth Services upon termination of the contract or whenever such equipment is not being used in conformity with the provisions of this contract. LSUHSC-New Orleans shall maintain or cause to be maintained in good working order all equipment purchased during the period of its useful life.

LSUHSC-New Orleans agrees to maintain an inventory of all equipment purchased that has an acquisition cost of \$1,000 or more and a useful life of one year or more.

Equipment purchased with contract funds may not be conveyed, sold, salvaged or transferred without the express written consent of Youth Services. No equipment acquired with said funds shall be capitalized as a cost on future contracts between Office and LSUHSC-New Orleans.

(iii) Youth Services shall pay for all utilities and telephone service including long distance charges for calls originating from JCY and BCCY and related to the performance of LSUHSC-New Orleans obligations hereunder except as specifically budgeted to LSUHSC-New Orleans.

(iv) Youth Services shall provide security, protection and adequate Security Officers/Youth Care Worker staffing in JCY and BCCY to allow LSUHSC-New Orleans and its employees to effectively carry out their duties in a safe work environment. In the event that an unsafe work environment develops, Youth Services agrees to consult with LSUHSC-New Orleans Program Director and facility Responsible Health Authority (RHA) to make an accurate determination of the situation. LSUHSC-New Orleans reserves the right to temporarily suspend services in all effected areas until safety has been restored. Only emergencies services will be provided in a manner that does not place at risk the safety of clinical staff providing such emergency services.

(v) To the extent allowed by federal and state law and regulations, upon request, LSUHSC-New Orleans and Youth Services will provide each other mutual access to charts, other relevant documents, personnel and facilities required for either party to perform quality assurance and monitoring in a timely manner, in accordance with protocols adopted by LSUHSC-New Orleans and Youth Services, but neither party may make changes to the other's data or information.

(vi) Laboratory services, pharmaceuticals, eye glasses and other supplies or services necessary for the provision of Health Services at JCY and BCCY and for which no budget allocation has been included in LSUHSC-New Orleans budget shall continue to be provided by

Youth Services to the extent they are currently budgeted to Youth Services, but in no event shall such expenses become the obligation of LSUHSC-New Orleans except by express prior written agreement of both the Youth Services Deputy Secretary and the Program Director.

(vii) OYD Youth Services shall provide housekeeping and professional cleaning services meeting basic public health standards in work areas used by LSUHSC-New Orleans health care and program personnel inclusive of staff offices, bathrooms, conference rooms and work stations, infirmaries and wards, youth intake areas and mental health offices.

(viii) Youth Services agrees that, upon written notice to the Deputy Secretary of Youth Services, the Program Director may authorize re-budgeting of the total direct costs at his or her discretion within budget categories to meet unanticipated requirements or as needed to accomplish the programmatic goals or other purposes of the contract. Upon notice to Youth Services, the Program Director is hereby authorized each year to re-budget up to a total of ten percent (10%) of the year's funds between budget categories at his or her discretion to meet unanticipated requirements or as needed to accomplish programmatic goals or other purposes of this contract. For the purposes of this contract, budget categories shall be Personnel, Travel, Operating Services, Supplies, Professional Services, Equipment and Other Charges.

d. Status of Parties:

Any language or provision contained in this Contract does not and shall not be construed to create any obligations flowing from LSUHSC-New Orleans to any party or entity other than Youth Services. Any language or provision contained in this Contract does not and shall not be construed to create any obligations flowing from Youth Services to any party or entity other than LSUHSC-New Orleans.

e. Contract Objective:

The objective of this Contract is to engage the services of LSUHSC-New Orleans to provide specified Health Services to juveniles at JCY and BCCY and otherwise as specifically set forth herein and to provide quality assurance and monitoring, training, telemedicine and informatics and certain administrative services with respect to JCY and BCCY.

f. Measures of Performance:

Measures of performance will be those quality assurance indicators for LSUHSC-New Orleans-managed healthcare and mental health services as set forth by Program Evaluation provisions in regards to Health Services at JCY and BCCY. In addition to quality assurance, LSUHSC-New Orleans will provide programmatic and health care outcomes measures. LSUHSC-New Orleans agrees to cooperate with Youth Services' accreditation efforts pertaining to Health Services within budget and staffing allowances. LSUHSC-New Orleans will document its performance on a quarterly basis.

g. Monitoring:

Contract objectives and measures of performance will be monitored by contract performance monitor.

The term of this Contract shall be as follows:

6) BEGINNING DATE: July 1, 2007	7) ENDING DATE: June 30, 2010
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This Contract is not effective until approved by the Director of the Office of Contractual Review in accordance with La. R.S. 39:1502, but upon such approval shall be effective July 1, 2006

8) MAXIMUM CONTRACT AMOUNT: July 1, 2007-June 30, 2008 \$11,322,361 July 1, 2008-June 30, 2009 \$ 11,877,157 July 1, 2009-June 30, 2010 \$ 12,459,137	9) PAYMENT MADE ONLY UPON APPROVAL OF DEPUTY SECRETARY OF THE OFFICE OF YOUTH DEVELOPMENT OR DESIGNEE
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10) TERMS OF PAYMENT: Any other language in this Contract to the contrary notwithstanding, this Contract is a cost reimbursement contract. Youth Services shall pay to LSUHSC-New Orleans as follows:

a. LSUHSC-New Orleans shall invoice Youth Services for actual expenditures incurred by LSUHSC-New Orleans in accordance with the budget for each year attached hereto. LSUHSC-New Orleans shall submit invoices by the 20th day of the following month for services provided at JCY and BCCY during the previous calendar month. However, the final fiscal year invoice of each fiscal year for the duration of this contract period pursuant to this subparagraph 10.a shall be provided to Youth Services no later than August 10. Youth Services shall promptly reimburse LSUHSC-New Orleans for such expenditures upon receipt by Youth Services from LSUHSC-New Orleans of an invoice reflecting the expenditure and in any event shall make payment to LSUHSC-New Orleans within thirty (30) days of the receipt of the invoice. By the 25th day of

the following month, LSUHSC-New Orleans shall submit a budget projecting expenditures for the remainder of the fiscal year.

b. Travel expenses by LSUHSC-New Orleans employees shall be reimbursed by LSUHSC-New Orleans to its employees in accordance with Division of Administration Procedure Memorandum 49 (State Travel Regulations). Travel and other reimbursable expenses shall constitute part of the total maximum payable under the Contract.

c. LSUHSC-New Orleans and Youth Services agree that LSUHSC-New Orleans invoices to Youth Services shall include an overhead charge of nine percent (9%) on all invoices for expenses excluding equipment purchases. LSUHSC-New Orleans acknowledges that it is critically important that uniform protocols for medical, mental health, dental and related services be timely developed and implemented at each of the Youth Services secure juvenile facilities. It further is critically important to timely develop and implement a uniform and consistent training program for staff, a uniform and consistent quality assurance and monitoring program; a uniform and consistent electronic health record accessible throughout Youth Services' secure juvenile facility, and a joint mental health transfer policy, all as provided in 5(b), above. This contract obligates LSUHSC-New Orleans to work cooperatively with LSUHSC-Shreveport to develop the Joint Health Care Policies as per 5b(iii) and a Youth Services Training Program as per 5b(v). Youth Services, LSUHSC-New Orleans and LSUHSC-Shreveport will work cooperatively to develop, revise and implement the Youth Services Quality Assurance and Monitoring Program as per 5b(iv); and identify an electronic health record vendor as per 5b(vii) This contract further obligates LSUHSC-New Orleans to work cooperatively with LSUHSC-Shreveport and Youth Services to develop and implement a program for transferring juveniles between the Swanson mental health unit and Jetson and BCCY within 90 days of this contract as per 5b(viii).

11) SPECIAL AND OTHER PROVISIONS:

a. **Special Provisions:** LSUHSC-New Orleans understands and agrees that the following special conditions of the Contract exist for the benefit of Youth Services, its employees and youth in its custody, and agrees to abide by said special conditions. LSUHSC-New Orleans understands and agrees that violation by LSUHSC-New Orleans of either of the following special conditions shall be cause for cancellation of this Contract subject to the dispute resolution procedure set forth in La. R.S. 39:1524-25. LSUHSC-New Orleans also agrees that it and its employees shall abide by published policies of Youth Services which are in place as of the effective date of this Contract to the extent such policies directly address safety and security and reasonable amendments to such policies to the extent such amendments directly address safety and security.

(i) While on the institutional grounds, LSUHSC-New Orleans will strictly adhere to all federal, state and local laws. Youth Services and LSUHSC-New Orleans will maintain policies and procedures addressing access to, and delivery of, Health Services for the juveniles confined in JCY and BCCY. These policies and procedures shall meet the standards and requirements of LSUHSC-New Orleans and the Youth Services.

(ii) Any person may be barred from the institution or removed from the institution if it is in the best interest of Youth Services as reasonably determined by the JCY or BCCY Director or his/her designee. If this should take place, the Program Director will be notified immediately with the rationale for an employee being barred from the institution. The performance of the duties by LSUHSC-New Orleans outlined in this Contract, are contingent upon LSUHSC-New Orleans employees having access to the institutions and areas necessary to provide these duties.

b. Other Provisions:

(i) LSUHSC-New Orleans services pursuant to this Contract shall be as an independent contractor. LSUHSC-New Orleans employees will be acting in the course and scope of their employment, appointment or assignment for or on behalf of LSUHSC-New Orleans, and shall not be entitled to receive or accept from Youth Services any remuneration or other compensation whatsoever for services provided at Youth Services. It is expressly acknowledged and stipulated by LSUHSC-New Orleans and Youth Services that each LSUHSC-New Orleans employee assigned in any capacity to Youth Services pursuant to this Contract is and shall be an employee solely of LSUHSC-New Orleans and shall not be or be considered an employee, representative or agent of Youth Services and shall not be subject to Youth Services Human Resources guidelines.

(ii) Nothing in this Contract is intended nor shall be construed to create an employer/employee relationship, a joint venture relationship, or a lease or landlord/tenant relationship or to allow Youth Services to exercise controls or direction over the manner or method in which LSUHSC-New Orleans or LSUHSC-New Orleans employees perform the services which are the subject matter of this Contract; provided, however, that this shall not prevent Youth Services from exercising such control or direction over LSUHSC-New Orleans employees as deemed necessary and appropriate by Youth Services in matters relating to security. LSUHSC-New Orleans understands and agrees that: (1) LSUHSC-New Orleans employees will not be treated as employees by Youth Services for federal tax purposes; (2) Youth Services will not withhold on behalf of LSUHSC-New Orleans or LSUHSC-New Orleans employees pursuant to this Contract any sums for income tax, unemployment insurance, social security or any other withholding pursuant to any law, or make available to LSUHSC-New Orleans or LSUHSC-New Orleans employees any of the benefits afforded to employees of Youth Services; and (3) all of such payments, withholdings, and benefits if any, are the sole responsibility of LSUHSC-New Orleans. In the event the Internal Revenue Service or any other governmental agency should question or challenge the status of LSUHSC-New Orleans, LSUHSC-New Orleans physicians or other employees, the parties hereto mutually agree that both LSUHSC-New Orleans and Youth Services shall have the right to participate in any discussion or negotiation occurring with such agency or agencies, irrespective of whom or by whom such discussions or negotiations are initiated.

(iii) If an LSUHSC-New Orleans physician, psychiatrist or dentist assigned to JCY and BCCY determines that a juvenile requires specialized services or other medical, mental health or dental care outside of that facility, then LSUHSC-New Orleans shall assist Youth Services in coordinating the delivery of services, if available, at other LSUHSC-New Orleans

facilities. It shall be the responsibility of Youth Services to provide transportation to any such other LSUHSC-New Orleans facility. When LSUHSC-New Orleans Facility Medical Director or designee and/or Facility Responsible Healthcare Authority determines that services are necessary that are not available within JCY and BCCY or at other facilities (e.g., psychiatric hospitals), LSUHSC-New Orleans agrees to provide consultation and referral assistance to Youth Services. Responsibility for transportation and arrangements for admission to such services and facilities are the sole responsibility of Youth Services.

(iv) Any notice or correspondence required or permitted to be given by LSUHSC-New Orleans to Youth Services under this Contract may be given by facsimile, hand delivery or regular mail, provided that all notices or correspondence may be given by, and all notices of default shall be given by certified or registered U.S. Mail, postage prepaid, return receipt requested. The following addresses shall be used as appropriate:

Deputy Secretary, Office of Youth Division, Louisiana
7919 Independence Blvd.
Baton Rouge, LA 70806
facsimile: 225.287-7992

Any notice or correspondence required or permitted to be given by Youth Services to LSUHSC-New Orleans under this Contract may be given by facsimile, hand delivery or regular mail, provided that all notices or correspondence may be given by, and all notices of default shall be given by certified or registered U.S. Mail, postage prepaid, return receipt requested. The following address shall be used as appropriate:

Program Director
LSUHSC-New Orleans Juvenile Justice Program
c/o JJP Business Office- Jetson Center for Youth
15200 Old Scenic Highway
Baton Rouge, Louisiana 70874

(v) To the extent allowed by law, the parties may negotiate to extend this Contract upon such terms and conditions as are mutually agreeable. LSUHSC-New Orleans shall advise Youth Services in writing at least three months prior to the end of the term as to the anticipated increased or decreased cost of extending the term of this Contract for one year. If the parties are unable to agree on the terms and conditions of the extension, the parties shall have no obligation beyond the period provided in this Contract between the parties.

(vi) To the extent allowed by law and to the extent not otherwise paid or covered by the Office of Risk Management or another insurer, LSUHSC-New Orleans hereby agrees to hold harmless and indemnify Youth Services and its officers, directors and employees from any claim, suit or loss, including expenses of litigation, sustained by Youth Services, its officers, directors or employees, or by any physician employed by Youth Services for any asserted injury to or death of any person to the extent that it results from or is caused by the asserted negligence, error or omission of any LSUHSC-New Orleans physician, employee or agent. However,

"agent" as used in this paragraph shall exclude any Youth Services physician, employee, or agent.

(vii) To the extent allowed by law and to the extent not otherwise paid or covered by the Office of Risk Management or another insurer, Youth Services hereby agrees to hold harmless and indemnify LSUHSC-New Orleans, its board members, officers, employees and agents from any claim, suit or loss, including expenses of litigation, sustained by LSUHSC-New Orleans, its board members, officers, employees or agents for any asserted injury to or death of any person to the extent that it results from or is caused by the negligence, error, fault or omission of Youth Services, or of its officers, directors, employees or agents, or any physician or other member of Youth Services' Medical Staff. However "Agent" as used in this paragraph shall exclude any LSUHSC-New Orleans physician, employee or agent to the extent that they are performing services for LSUHSC-New Orleans. Further, provided that this indemnification shall not be effective to the extent that Youth Services' employees in committing such negligence, error, fault or omission are acting at the direction of LSUHSC-New Orleans.

(viii) The Program Director shall be the Principal Investigator for LSUHSC-New Orleans with respect to this Contract.

(ix) Youth Services will not object to participation and attendance by an LSUHSC-New Orleans program representative of LSUHSC-New Orleans choosing and/or expert consultant in any Health Services compliance or review visit conducted in accordance with accreditation of facility services as it relates to the provision of services under this Contract.

12) STANDARD PROVISIONS:

a. Any alterations, variations, modifications, waivers of provisions or amendments to this Contract shall be valid only when they have been reduced to writing, duly signed by both parties and when required, approved by the Division of Administration and attached to the original of this Contract.

b. LSUHSC-New Orleans shall not assign any interest in the Contract, and shall not transfer any interest in the same (whether by assignment or novation), without the prior written consent of Youth Services except that claims for money due or to become due to LSUHSC-New Orleans from Youth Services under this Contract may be assigned to a bank, trust company, or other financial institution without such approval. Notice of any such assignment or transfer shall be furnished promptly to Youth Services' Procurement and Contractual Review Division and the Office of Contract Review.

c. LSUHSC-New Orleans and Youth Services agree to abide by the requirements of the following, to the extent required by law: Americans with Disabilities Act of 1990, Title VI and VII of the Civil Rights Act of 1964 as amended by Equal Opportunity Act of 1972, La. R.S. 15:574.12, Confidentiality, Vietnam Era Veteran's Readjustment Assistance Act of 1974, Title IX of the Education Amendments of 1972, the Age Act of 1972, Federal Executive Order 11246 and the Federal Rehabilitation Act of 1973, as amended. LSUHSC-New Orleans and Youth Services agree not to discriminate in their employment practices. LSUHSC-New Orleans will

render services under this Contract without regard to race, color, religion, sex, national origin, veteran status, political affiliation, or disabilities. Any act of discrimination committed by LSUHSC-New Orleans or Youth Services, or failure to comply with these statutory obligations when applicable shall be grounds for termination of this Contract.

d. As required by Louisiana law and by the Office of Contractual Review, it is hereby agreed that the Legislative Auditor of the State of Louisiana and/or the Office of the Governor, Division of Administration auditors shall have the option of auditing all documents, records and accounts of LSUHSC-New Orleans which relate to this Contract. Furthermore, it is agreed that the Legislative Auditor of the State of Louisiana and/or any auditors employed or engaged by LSUHSC-New Orleans shall have the option of auditing all documents, records and accounts of Youth Services which relate to this Contract.

e. LSUHSC-New Orleans agrees and realizes that this Contract is subject to and conditioned upon the availability and appropriation of Federal and/or State funds and that no liability or obligation for payment will develop between the parties until this Contract has been approved by the Director of the Office of Contractual Review, Division of Administration, in accordance with La. R.S. 39:1502; provided, however, that LSUHSC-New Orleans shall have no obligation to perform any services hereunder until it has been informed by Youth Services that funds are available for the Contract and that the Contract has been approved by the Director of the Office of Contractual Review. In the event that such assurance has not been delivered within thirty (30) days of execution of this Contract, LSUHSC-New Orleans may cancel this Contract and be reimbursed by Youth Services for any expenses incurred in anticipation of the Contract by LSUHSC-New Orleans, including but not limited to termination expenses or salary that is paid to faculty or staff hired to fulfill the obligations of this Contract.

f. The continuation of this Contract is contingent upon the appropriation of funds to fulfill the requirements of the Contract by the Legislature. If the Legislature fails to appropriate sufficient monies to provide for the continuation of the Contract, or if such appropriation is reduced by the veto of the Governor or by any means provided in the appropriations act to prevent the total appropriation for the year from exceeding revenues for that year, or for any other lawful purpose, and the effect of such reduction is to provide insufficient monies for the continuation of the Contract, the Contract shall terminate on the date of the beginning of the first fiscal year for which funds are not appropriated.

In that event and to the extent allowed by law, LSUHSC-New Orleans shall be paid by Youth Services all amounts due as of the termination of the Contract and shall be reimbursed by Youth Services for any expenses incurred whether or not expended as of that date, including but not limited to termination expenses or salary that is paid to faculty or staff hired to fulfill the obligations of this Contract; provided, however, that Youth Services shall not be obligated to pay any amounts for which funds are not budgeted and appropriated during the current fiscal year. In the event of a nonappropriation, Youth Services agrees to make all good faith efforts to obtain funding through appropriation or otherwise to reimburse LSU with respect to all such expenses arising out of termination on the basis of nonappropriation.

g. No funds provided herein shall be used to urge any elector to vote for or against any candidate or proposition on an election ballot nor shall such funds be used to lobby for or against any proposition or matter having the effect of law being considered by the Legislature or any local governing authority or of any political subdivision. This provision shall not prevent the normal dissemination of factual information relative to a proposition on any election ballot or a proposition or matter having the effect of law under consideration by the Legislature or governing authority or of any political subdivision.

h. Upon completion of this Contract, Youth Services shall retain all original and electronic Health Services records related to the offenders. Youth Services and LSUHSC-New Orleans each shall retain the original and electronic data and other documentation, reports, worksheets or other materials in their possession, and related to this Contract. Both Youth Services and LSUHSC-New Orleans shall provide copies to the other party upon request at that party's expense, subject, however, to any rights of privacy related to such records. LSUHSC-New Orleans and Youth Services agree to retain all books, records, and other document relevant to this Contract and the funds expended hereunder for at least four (4) years after final payment, except to the extent LSUHSC-New Orleans books, records and other documents have been returned to Youth Services.

i. LSUHSC-New Orleans shall have the right to utilize any and all data, research findings, research documents, test results and all information, (collectively "Data") developed or derived during the course of this Contract and all previous contracts and, following any expiration or other termination of this Contract, shall retain the right to make use of such Data and to create, copy distribute, revise and publish documents and information incorporating such Data. In addition, with respect to medical and mental health data and all other data related to delivery of LSUHSC-New Orleans services, LSUHSC-New Orleans will (1) manage data collection systems (both electronic and paper systems); (2) manage and oversee data extraction and manipulation (3) ensure all raw data and data systems are properly secured according to federal and state regulations; (4) ensure all LSUHSC-New Orleans employees managing raw data are fully trained in data security and privacy regulations (5) act as custodian for access to raw and aggregate data; (6) manage and perform all data requests related to LSUHSC-New Orleans data systems; (7) provide support and expertise in data analysis and interpretation.

Prior to publication or written distribution by LSU of research incorporation Data, LSU shall give seven (7) calendar days written notice of such intent to Youth Services. Subject to the provisions of Paragraph 13 hereof, and except as otherwise prohibited by law, each party hereto agrees to give the other access to the records, reports, worksheets or other documents related to this Contract, which rights shall not terminate upon termination of this Contract, subject to appropriate and relevant laws regarding confidentiality. Each party shall respect the intellectual property rights of the other party, and when making use of the other's property through publication or written distribution the appropriate reference shall be made.

j. LSUHSC-New Orleans agrees that the responsibility for payment of taxes from the funds thus received under this LSUHSC-New Orleans and/or legislative appropriation shall be LSUHSC-New Orleans obligation.

k. LSUHSC-New Orleans shall give Youth Services written notice of any intent by LSUHSC-New Orleans to enter into a subcontract and if Youth Services has not delivered a written disapproval, reasonable under the circumstances, to the Program Director within five (5) calendar days of such notice, LSUHSC-New Orleans may enter into the subcontract and Youth Services shall be deemed to have approved. In the event of a disagreement between LSUHSC-New Orleans and Youth Services as to disapproval by Youth Services, the Program Director and the Deputy Director shall meet within five (5) calendar days of the delivery of the disapproval to resolve the matter. If no resolution can be reached, LSUHSC-New Orleans shall have the right to terminate the Contract upon no less than thirty (30) days written notice. No subcontract shall relieve LSUHSC-New Orleans of responsibility for the performance under this Contract. This provision shall not apply to the hiring of LSUHSC-New Orleans employees or to the engagement by LSUHSC-New Orleans of professional direct care providers.

l. Either party may terminate this Contract for cause based upon the failure of the other party to comply with the terms and/or conditions of the Contract, including but not limited to the failure by Youth Services to pay to LSUHSC-New Orleans the full amounts of all sums owed to it pursuant to paragraph 10 hereof; provided that such nondefaulting party shall give the defaulting party written notice specifying the failure. If within thirty (30) days after receipt of such notice the defaulting party shall not have corrected such failure or instituted a correction which within a reasonable amount of time will correct the failure, then the non-defaulting party may terminate the Contract.

m. LSUHSC-New Orleans or Youth Services shall be excused from performance under the Contract for any period that LSUHSC-New Orleans or Youth Services is prevented from performing any services in whole or in part as a result of an act of God, strike, war, civil disturbance, epidemic or court order provided LSUHSC-New Orleans or Youth Services had prudently and promptly acted to take any and all corrective steps that are within LSUHSC-New Orleans or Youth Services' control to ensure that LSUHSC-New Orleans or Youth Services can promptly perform.

n. The Youth Services represents to LSUHSC-New Orleans that all disclosures of health information required to be made to or on behalf of the Youth Services under the terms of this Agreement are necessary for one or more of the purposes set forth in 45 C.F.R. § 164.512(k)(5)(i), and that the information to be disclosed is the minimum necessary for those purposes within the meaning of 45 C.F.R. § 164.502(b).

o. In the event of the termination of this Contract, the obligations of the parties articulated in the following sections shall survive termination: 11)a (vi) and (vii); and 12)h, i and o.

p. This Contract contains or has attached hereto all the terms and conditions agreed upon by the contracting parties.

13) DISCLOSURE OF PROTECTED HEALTH INFORMATION:

a. Youth Services and LSUHSC-New Orleans agree that the performance of their respective duties under this Contract will require the disclosure of health information by LSUHSC-New Orleans to Youth Services, including medical, mental health, and dental records, of youth in the legal custody of the Youth Services housed at the aforementioned Youth Services Secure Facilities.

b. The Youth Services requires that any requested health information be disclosed or produced to the following staff at each of the Juvenile Facilities: all directors, deputy directors, assistant directors, program managers, medical, dental and mental health staff, and case workers. In addition, the Youth Services requires that requested health information be disclosed or produced to the following officials at its Office of Youth Development: the Deputy Secretary, the Deputy Assistant Secretaries, programmers, and the Director of Education.

c. Youth Services agrees that its request for health information concerning juveniles constitutes its representation to LSUHSC-New Orleans that the requested information is required to be disclosed to the aforementioned individuals for one or more of the following reasons, as permitted by 45 C.F.R. §164.512 (k) (5):


- (1) The information is necessary in order to furnish Health Services to the youth.
- (2) The information is necessary for the protection of the health and safety of the youth whose records are required or other youth at JCY and BCCY.
- (3) The information is necessary for the protection of the health and safety of the officers, employees or others at JCY and BCCY.
- (4) The information is necessary for the protection of the health and safety of individuals, officers and others responsible for the transporting of youth, or their transfer from one Youth Services Secure Facilities to another facility or location.
- (5) The information is necessary to conduct law enforcement on the premises of JCY and BCCY.
- (6) The information is necessary for the proper administration and maintenance of the safety, security and good order of JCY and BCCY.

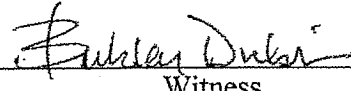
d. Youth Services hereby certifies to LSUHSC-New Orleans that any requested information will be the minimum necessary for the Youth Services to accomplish the purpose(s) for which disclosure of such information is requested within the meaning of 45 C.F.R. §164.502 (b).


In witness whereof, this Contract is executed and entered effective as of the ____ day of _____, 2007.

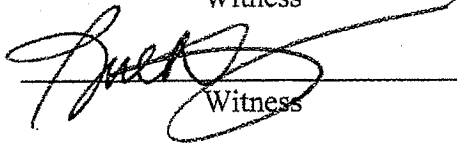
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[SIGNATURE PAGE FOR CONTRACT BETWEEN LOUISIANA OFFICE OF YOUTH
DEVELOPMENT OF PUBLIC SAFETY AND CORRECTIONS, CORRECTIONS
SERVICES (Youth Services) AND BOARD OF SUPERVISORS OF LOUISIANA STATE
UNIVERSITY AND AGRICULTURAL AND MECHANICAL COLLEGE ON BEHALF
OF ITS LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER (LSUHSC-
NEW ORLEANS) CONTRACT # _____]

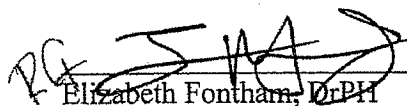

Simon Gonsoulin, Deputy Secretary
La. Office of Youth Development


Witness


Larry H. Hollier, MD
Chancellor, LSUHSC-New Orleans


Witness

107

 F-TF 12/6/07
Elizabeth Fontham, DrPH
Dean, LSUHSC-NO School of Public Health

Witness


Witness

Witness

Witness

Approved: _____
Ms. Susan Smith, Director of
Office of Contractual Review

Date: _____

APPROVED
Office of the Governor
Office of Contractual Review
JAN 17 2008

DIRECTOR
LSUHSC-NO-VCAP
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LSU HEALTH SCIENCES CENTER JUVENILE JUSTICE PROGRAM

ACTUAL FISCAL YEAR 07-08 FINAL BUDGETS SECURE FACILITIES - SOUTHERN REGION

UPDATED DECEMBER 11, 2007

CATEGORY	REGIONAL HEALTHCARE ADMINISTRATION & PROGRAMS *	TELEMEDICINE/ INFORMATICS	JETSON CENTER FOR YOUTH	BRIDGE CITY CENTER FOR YOUTH	TOTAL	TOTAL Incl attrition (5%)
Personnel	\$952,178	\$466,228	\$4,875,819	\$2,740,169	\$9,034,394	\$8,582,674
Travel	\$33,435	\$49,000	\$27,430	\$15,284	\$125,149	\$125,149
Operating Services	\$132,406	\$146,919	\$61,150	\$62,515	\$402,990	\$402,990
Supplies	\$35,860	\$18,978	\$84,706	\$69,203	\$208,747	\$208,747
Prof. Services	\$191,105	\$0	\$519,922	\$222,650	\$933,677	\$933,677
Equipment	\$9,000	\$102,000	\$15,333	\$20,000	\$146,333	\$146,333
Sub-Total	\$1,353,984	\$783,125	\$5,584,359	\$3,129,821	\$10,851,289	\$10,399,569
Indirect Costs	\$121,949	\$61,301	\$501,212	\$279,884	\$963,446	\$922,791
Grand Total	\$1,475,933	\$844,426	\$6,085,571	\$3,409,705	\$11,814,735	\$11,322,361

* Regional Healthcare Administration and Programs is comprised of: Regional Directors/Experts, Regional Business Administration ; Regional Training and Regional Program Evaluation

FY 07-08 TOTAL (UPDT 12-11-07)

LAST UPDATED: 12/11/07 12:12 PM

LSU HEALTH SCIENCES CENTER JUVENILE JUSTICE PROGRAM

ACTUAL FISCAL YEAR 08-09 FINAL BUDGETS SECURE FACILITIES - SOUTHERN REGION

UPDATED OCTOBER 10, 2007

CATEGORY	REGIONAL HEALTHCARE ADMINISTRATION & PROGRAMS *	TELEMEDICINE/ INFORMATICS	JETSON CENTER FOR YOUTH	BRIDGE CITY CENTER FOR YOUTH	TOTAL	ADJUSTMENT TO MATCH CONTRACT BUDGET AMOUNT	TOTAL incl attrition (5%)
Personnel	\$1,067,951	\$502,149	\$5,278,225	\$3,101,284	\$9,949,608	\$334,886	\$8,917,243
Travel	\$33,635	\$49,000	\$27,430	\$15,284	\$125,349		\$125,349
Operating Services	\$165,406	\$218,485	\$63,150	\$33,015	\$480,055		\$480,055
Supplies	\$25,860	\$19,213	\$69,706	\$51,983	\$166,762		\$166,762
Prof. Services	\$201,401	\$0	\$741,859	\$227,720	\$1,170,980		\$1,170,980
Equipment	\$9,000	\$10,000	\$15,333	\$5,000	\$39,333		\$39,333
Sub-Total	\$1,503,253	\$798,846	\$6,195,703	\$3,434,286	\$11,932,088	\$534,886	\$10,899,722
Indirect Costs	\$134,483	\$70,996	\$556,233	\$308,636	\$1,070,348	\$48,140	\$977,435
Grand Total	\$1,637,736	\$869,842	\$6,751,936	\$3,742,922	\$13,002,436	\$583,025	\$11,877,157

* Regional Healthcare Administration and Programs is comprised of : Regional Directors/Experts, Regional Business Administration, Regional Training and Regional Program Evaluation

LSU HEALTH SCIENCES CENTER JUVENILE JUSTICE PROGRAM

ACTUAL FISCAL YEAR 09-10 ACTUAL BUDGETS SECURE FACILITIES - SOUTHERN REGION

UPDATED DECEMBER 11, 2007

CATEGORY	REGIONAL HEALTHCARE ADMINISTRATION & PROGRAMS *	TELEMEDICINE/ INFORMATICS	JETSON CENTER FOR YOUTH	BRIDGE CITY CENTER FOR YOUTH	TOTAL	ADJUSTMENT TO MATCH CONTRACT BUDGET AMOUNT	TOTAL incl attrition (5%)
Personnel	\$1,136,318	\$519,130	\$5,474,865	\$3,094,241	\$10,224,555	\$312,223	\$9,401,104
Travel	\$33,635	\$49,000	\$27,430	\$15,284	\$125,349		\$125,349
Operating Services	\$180,406	\$243,549	\$68,150	\$33,015	\$525,120		\$525,120
Supplies	\$30,860	\$19,213	\$69,706	\$51,983	\$171,762		\$171,762
Prof. Services	\$201,401	\$0	\$741,859	\$227,720	\$1,170,980		\$1,170,980
Equipment	\$9,000	\$10,000	\$15,333	\$5,000	\$39,333		\$39,333
Sub-Total	\$1,591,620	\$840,892	\$6,397,343	\$3,427,244	\$12,257,099	\$312,223	\$11,433,648
Indirect Costs	\$142,436	\$74,780	\$574,381	\$308,002	\$1,099,599	\$28,100	\$1,025,488
Grand Total	\$1,734,056	\$915,673	\$6,971,724	\$3,735,245	\$13,156,698	\$340,323	\$12,459,137

* Regional Healthcare Administration and Programs is comprised of: Regional Directors/Experts, Regional Business Administration; Regional Training and Regional Program Evaluation

Bridge City Center for Youth

Dental Room

- 1 Autoclass (Steris)
- 1 rolling table (16"x32")
- 1 tall rolling stool
- 1 2-drawer file cabinet
- 1 dental chair (A-DEC)
- 1 X-ray unit (Sirona Model #4684606D33C2)
- 1 control panel (Hardwood Model #D3334)
- 1 dental chair/stool (A-DEC)
- 1 5-drawer tool chest (Craftsman)
- 1 Demetron LC
- 1 Opimix Model #100
- 1 sterilizer (Patterson Dental Model #PA4)

Break Room

- 1 folding table (3'x5')
- 5 rolling office chairs
- 1 standard chair
- 1 folding chair
- 1 table (16"x20")
- 1 table (18"x6')
- 1 table cabinet (16"x30") w/ fold down shelf on sides
- 1 wheelchair (Tracer EX2)
- 2 lockers (10"x12"x6')
- 1 microwave (Haier Model #MWMIIIIOOTW)
- 1 walker

Nurse Station

- 1 medicine cart (3 large & 4 small drawers)
- 3 rolling office chairs
- 1 L-shape desk
- 2 thermometers (Welch Allen)
- 1 Power Heart AED (Model #921ORD-001)
- 1 6-drawer file cabinet
- 1 emergency bag with supplies
- 1 double wall lateral file cabinet
- 1 single wall lateral file cabinet
- 1 table (22"x6')
- 1 4-drawer white cabinet
- 1 rolling stool

- 1 table (12"x32")
- 1 table (16"x24")
- 2 nebulizers (Mada Model #275)
- 1 exam table
- 1 oxygen tank (Victor Med Model #IHB88702)
- 1 ProneB Ultra (Model #85B0000)
- 1 old O-2 tank (AirLiquid #029BTN2018A)
- 1 refrigerator (Haier)
- 1 pulse oximeter
- 1 refrigerator (Kenmore)
- 1 diagnostic system (Welch Allyn #125)
- 2 O-2 M-7 1308A with case
- 1 cast cutter (American Orthopedic M25)
- 1 CPR Board (#1178)
- 1 suction machine (SchucoVac Model #S130P)
- 1 6-shelf book case
- 1 rolling table (10"x14")

Exam Room 3

- 1 exam table (Ritter 104)
- 1 refrigerator/freezer (Magic Chef)
- 1 refrigerator side/side (Whirlpool)
- 1 audiology wall unit (Heine EN80)
- 1 rolling stool
- 1 tool cabinet (Craftsman)
- 1 large 3-shelf unit
- 1 Eclipse (Model ECL850)
- 1 EKG cart

Hall Closet

- 7 first aid kits

Pharmacist Room

- 1 Refrigerator side/side
- 1 refrigerator, small (Haier)
- 1 control substance cabinet
- 3 2-door file cabinets
- 2 2-door/drawer file cabinets
- 1 L-shape desk
- 1 wooden desk unit (24"x42")
- 1 heating seal (Master Piece Co.)
- 1 4-drawer file cabinet
- 1 2-section wall file unit

- 1 3-drawer small file cabinet

File Room

- 1 file cart
- 1 rotating files unit

DON Office

- 2 rolling office chairs
- 2 desk units
- 2 3-drawer lateral files
- 1 3-drawer small file cabinet
- 1 5-drawer file cabinet

Lobby

- 1 TV/VCR (Quasar)

Exam Room 1

- 2 scales (Healthometer)
- 1 small refrigerator (Sanyo)
- 1 3-drawer large w/ small drawers on side
- 1 rolling file cart
- 1 tray table
- 1 autiology wall unit (Welch Allyn)
- 1 exam lamp (Dazor #795-3C)
- 1 exam table (Ritter)
- 1 5-drawer file cabinet
- 1 2-door large cabinet
- 1 4-door wooden cabinet (40"x24")
- 1 crutches
- 1 rolling stool
- 1 rolling office chair
- 1 2-drawer file cabinet
- 1 2-section desk

Observation Room 1

- 1 27" TV
- 1 4-drawer rolling bedside table (16"x22")
- 1 hospital bed
- 1 folding chair

Observation Room 2

- 3 observation beds
- 1 20" TV (RCA)
- 1 VCR/DVD (Emmerson)

Jetson Center for Youth

Infirmary

Room 103 – Training

- 1 lateral 5-drawer unit
- 1 lateral 6-drawer unit
- 3 lateral wall units
- 3 standard chairs
- 1 office roll chair
- 1 3-section desk unit
- 1 3-drawer under counter file cabinet
- 1 2-drawer lateral file cabinet

Room 106 – JJP Business Office

- 1 lateral 6-drawer
- 1 lateral 5-drawer
- 1 3-section desk unit
- 3 lateral wall units
- 1 shredder (Mod 225OX - Shredmaster GBC)
- 2 3-drawer under counter file cabinets
- 2 rolling office chairs
- 1 dolly

Room 107

- 1 4-section desk unit
- 1 smaller desk section
- 4 lateral wall units
- 1 rolling office chair
- 2 lateral 2-drawer cabinets
- 1 wall writing marker board (Quartet)

Room 109

- 3 6-drawer lateral file
- 2 5-drawer lateral file
- 4 standard chairs
- 1 rolling chair
- 1 refrigerator (GE)
- 1 microwave (Sanyo)
- 1 shredder (Fellowes)
- 3 lateral wall units
- 1 2-section desk

Room 111

- 1 standard chair
- 1 rolling office chair
- 2 6-drawer lateral file
- 1 2-drawer lateral cabinet
- 1 3-drawer under counter file
- 2 lateral wall units
- 1 2-section desk
- 1 3-shelf rolling unit
- 1 TV 15" (Toshiba)
- 1 2-door metal cabinet (24"x42"x5')

Room 113

- 1 folding table (15"x5')
- 2 5-drawer lateral file
- 1 6-drawer lateral file
- 1 binder machine (ProClick – Pronto P3000)
- 3 small lateral wall units
- 1 2-section desk
- 2 standard chairs
- 1 3-drawer under counter file

Telephone Closet

- Computer hook-up equipment
- 1 refrigerator (GE)
- 1 2-drawer under counter rolling file
- 1 2-door cabinet (15"x36"x5')
- 1 standard chair
- 1 2-section desk

Front Nurse Station

- 2 rolling chairs
- 1 1-drawer file unit (wall mount)
- 2 6-drawer lateral file
- 1 5-drawer lateral file

Room 132

- 3 lateral wall files
- 1 table (15"x40")
- 1 2-section desk unit
- 1 3-drawer under counter file
- 1 rolling office chair
- 2 standard chairs

Lobby Area

1 table (36"x5')

Room 122

2 5-drawer lateral file
2 refrigerators (GE)
1 2-drawer lateral file
2 2-drawer under counter file
1 3-drawer under counter file
1 rolling office chair
2 standard chairs
1 4-section desk units
3 lateral wall units (2 small & 1 large)
2 3-shelf book units

Room 123

1 6-drawer lateral file
3 lateral wall units
1 2-section desk unit
2 rolling office chairs
3 standard office chairs

LSU

1 charger (for laptops)

Room 124

1 6-drawer lateral file
1 2-drawer under counter file
1 2-section desk unit
1 rolling office chair
2 standard chairs
3 large lateral wall units
1 2-door metal cabinet (15"x36"x48")
1 3-drawer under counter file
1 refrigerator (Sanyo)

Room 125

1 refrigerator (Sanyo)
1 6-drawer lateral file
1 microwave (GE)
1 table (20"x46")
3 lateral wall units (large)
2 3-drawer under counter file
1 rolling computer table work station

- 1 rolling office chair
- 3 standard chairs
- 1 2-section desk unit

Room 126

- 1 6-drawer lateral file
- 3 large lateral wall units
- 1 3-section desk unit
- 2 rolling office chairs
- 3 standard chairs

Room 127

- 1 2-door flammable contents cabinet (36"x36"x5')
- 2 large lateral wall units
- 2 6-drawer lateral files

Room 129

- 3 6-drawer lateral file
- 1 rolling office chair
- 2 standard chairs
- 1 3-shelf wire shelf unit
- 1 lateral wall unit
- 1 3-drawer under counter file
- 1 2-drawer under counter file

Room 131

- 1 6-drawer lateral file
- 1 2-drawer under counter file
- 2 large wall lateral units (1 long & 1 short)
- 1 rolling office chair
- 1 standard chair
- 1 3 section-desk

Break Room

- 4 lockers 5-section
- 1 wooden shelf unit (36"x4'x10')
- 1 round table (40")
- 1 folding table (36"x7')
- 2 5-drawer lateral file
- 1 standard chair
- 1 rolling office chair
- 1 refrigerator (Kenmore)
- 1 microwave (Sanyo)
- 1 microwave (Sanyo)

Hall Corner

- 2 lateral wall units
- 1 2-drawer lateral under counter file
- 1 rental copier (Xerox)
- 1 section desk

Medical Records

- 4 large rolling records files (24")
- 1 small rolling records file (12")
- 1 table (36"x4')
- 4 desk sections
- 3 large lateral wall files
- 4 rolling office chairs
- 1 standard chair
- 3 3-drawer under counter file
- 1 shredder (Fellowes)
- 2 basket wire rolling carts
- 1 6-drawer lateral file
- 1 5-drawer lateral file
- 1 3-shelf stainless cart
- 2 3-shelf cart, gray, plastic

Conference Room B

- 4 5-drawer lateral file
- 1 4-drawer standard file cabinet
- 8 standard chairs
- 2 rolling office chairs
- 1 Healthometer Scale (Model 402)
- 1 desk unit (14"x48")
- 1 standard desk
- 1 table (20"x36")
- 1 fingerprint machine (Motorola)
- 1 Landmark printer (for fingerprint machine)
- 1 2-drawer under counter file cabinet
- 1 computer
- 1 ID machine
- 1 digital camera
- 1 microwave (GE)
- 1 refrigerator (GE)
- 1 TV 20" w/ DVD/VHS (Magnavox)
- 1 computer

Storage Room

- 1 refrigerator (Avanti)

- 1 key lock box

Room 140

- 1 6-drawer lateral file
- 1 5-drawer lateral file
- 1 refrigerator (Sanyo)
- 1 shredder
- 1 3-section desk unit
- 1 2-drawer under counter file
- 1 3-drawer under counter file
- 4 standard chairs
- 1 rolling office chair
- 3 large lateral wall
- 1 Jirms computer

Medical Office

- 3 3-section desk units
- 3 rolling office chairs
- 5 3-drawer under counter files
- 4 2-drawer under counter files
- 1 fax/printer (Brother)
- 6 large lateral wall units
- 5 6-drawer lateral files
- 2 dollies
- 1 vacuum (Hoover)
- 1 5-drawer lateral file
- 8 large lateral wall units
- 2 3-section desks
- 2 rolling office chairs
- 1 refrigerator (Sanyo)
- 1 microwave (Sanyo)
- 1 folding table (30"x48")
- 1 6-drawer lateral file
- 1 5-drawer lateral file
- 2 standard chairs
- 1 4-section desk unit
- 1 2-drawer under counter file
- 1 3-drawer under counter file
- 1 rolling office chair
- 2 large lateral files
- 2 medium lateral files
- 2 small lateral files
- 1 shredder (Fellowes)
- 1 rental copy machine (Ricoh)

DON Office

- 2 6-drawer lateral file
- 1 2-door metal cabinet (15"x30"x6')
- 1 4-section desk unit
- 2 standard chair
- 1 rolling office chair
- 1 refrigerator (GE)
- 1 microwave (Sunbeam)
- 2 2-drawer under counter file
- 3 3-drawer under counter file
- 4 large lateral wall units
- 2 small lateral wall units

Room 151

- 1 4-section desk unit
- 1 narcotic lock box (12"x15"x24")
- 3 rolling office chairs
- 2 2-drawer under counter files
- 4 medium lateral wall units
- 2 large lateral wall units
- 1 5-shelf wooden bookcase (10"x30"x6')
- 1 projector

Break Room

- 1 refrigerator (GE)
- 1 microwave (GE)
- 7 lockers, 5-section units
- 9 standard chairs
- 2 round tables (45")
- 2 ice machines (Scotsman)
- 1 refrigerator, narrow, no frost (Danby Designer)
- 1 3-shelf metal rolling cart

Isolation Room

- 3 restraint beds
- 1 regular metal bed

Admit Unit

- 7 regular metal beds
- 1 6-seat round table unit
- 1 2-drawer cabinet (15"x30"x30")
- 1 rolling cabinet – library (36"x16"x40")
- 2 19" TVs (Panasonic & RCA)

- 1 3-seat metal chair unit

Boys Ward

- 9 metal beds
- 1 6-seat round table unit
- 1 3-shelf wooden book unit
- 1 19" TV, DVD/VHS unit (Orion)
- 1 15" TV (Emerson)
- 1 standard desk
- 1 rolling office chair
- 1 3-seat metal chair unit
- 1 3-shelf rolling cart (16"x30")

Nurse Station

- 1 desk unit (24"x5')
- 3 rolling chairs
- 3 high rolling chairs
- 1 medicine cart (12"x24")
- 1 refrigerator (GE)
- 1 2-drawer under counter file cabinet
- 1 thermometer (Filac)
- 1 blood pressure (Am Diag Co)
- 6 rolling chairs
- 1 6-drawer medicine cart (MedLine)
- 3 2-drawer under counter file cabinets
- 1 scale (Detecto #437)

Conference Room

- 6 standard chairs
- 7 executive rolling chairs
- 2 rolling office chairs
- 3 folding tables (36"x6')
- 1 folding table (36"x48")
- 1 table, half roll (36"x48")
- 1 3-shelf metal rolling unit
- 1 27" TV surround (Panasonic)
- 2 folding metal chairs

Exam Room 2

- 1 exam table (Ritter 104) (Midmark)
- 1 audiology wall unit (Welch Allyn)
- 1 goose neck lamp
- 1 exam light, ultra violet
- 1 thermometer (FiLac)

- 2 rolling office chairs
- 1 stainless steel tray table

Exam Room 3

- 1 exam table (Ritter 104) (Midmark)
- 1 stainless tray table
- 2 goose neck lamps
- 1 autiology wall unit
- 1 rolling office chair

Exam Room 4

- 1 exam table (Ritter 104) (Midmark)
- 1 autiology wall unit (Welch Allyn)
- 1 goose neck lamp
- 1 scale (Detecto)
- 2 rolling office chairs
- 1 0-2
- 1 translucent eye cabinet (Goodlite Co.)
- 1 nebulizer (PulmoAide #5650D)
- 1 EKG (FutureMed)
- 1 pulse ok (Sims BCI)
- 1 Power Heart AED cardiac science
- 1 thermometer
- 1 mobil vac 2 (Aerosw)
- 1 CPR board (Lifesavor)
- 1 stainless tray cart

Exam Room 5

- 1 exam table (Ritter 04) (Midmark)
- 1 autiology wall unit (Welch Allyn)
- 1 autiology wall unit (Heine EN80)
- 1 rolling office chair
- 1 stainless tray cart
- 1 table (24"x42")
- 1 thermometer
- 1 standard chair

Exam Room 6

- 1 exam table (Ritter 104) (Midmark)
- 1 autiology wall unit (Welch Allyn)
- 2 thermometer (Filac)
- 1 rolling office chair
- 1 stainless tray cart
- 1 table (30"x36")

X-Ray

- 1 5-drawer standard file cabinet
- 1 x-ray tube (Siemens #3070021)
- 1 Optip (#345209X1953)
- 1 x-ray table
- 1 pandrex (Sirona #1889356D3285)
- 1 chest x-ray machine (Siemens #3832529G5457)
- 1 electrical panel cabinet (Siemens)
- 2 privacy curtain panel screens
- 1 reader smart CR (Fuji film)
- 1 x-ray control board (Siemens)
- 1 x-ray micro filmer (Siemens)
- 1 standard chair

Dental

- 1 PV dry autoclave dental (Harvey Barnstead)
- 2 large white cabinet units
- 1 Superdent 27 solid state
- 1 Accusonic Accubite
- 2 5-drawer lateral file
- 1 tall exam dental chair
- 2 exam lamps
- 1 tall exam stool
- 1 dental exam chair
- 1 ultrasonic scaler (Cavitron SPS)
- 1 rolling stool chair (Adec)
- 2 4-drawer rolling cabinet w/ slide top (20"x24")
- 1 rolling stool chair (Adec)
- 1 Amalgamator C-1a
- 1 Heliodent DS (Sirona #4684606D3302)
- 1 x-ray device (Sirona D3334)
- 1 Optilux 380 #VCL310
- 1 microwave (Sanyo)
- 1 polishing lathe (Baldor L3424M24)
- 1 vacuum forming machine 101 (T&S Dental)
- 1 vibrator Power Rite Buffalo (Leeson C4C17DH8GP)
- 1 Flometer (Belmed 5000)
- 1 Triad 2000 light
- 1 rolling office chair

Ophthalmology

- 1 rolling stool
- 1 4-drawer optical cabinet w/ lenses/briefcase

- 1 4-drawer rolling cabinet (15"x24")
- 1 9-drawer cabinet (Craftsman)
- 1 Instaveloper (Patent 244446)
- 1 Topcon electronic eye chart (ACP74) (auto chart projector)
- 1 exam chair (Reliance 6200L)
- 1 Opto Exam Arm (#7800)
- 1 slit lamp (Topcon SL-2ED)
- 1 Keratometer (Reichert 12515)
- 1 Phoroptor (Reichert 11635B)
- 1 Refraktoskop Beta 200 (Heine)
- 1 case with loose prisms
- 30 emergency kits

Otology

- 1 4-drawer rolling medicine cart (Harlott)
- 1 6-drawer medicine cart (Armstrong Med)
- 1 4-drawer rolling cart (12"x24")
- 1 table (12"x30")
- 1 Clinical Audiometer AC40
- 1 Acoustic Systems Audio (EnterAcoustics)
- 1 Ultronics (71126)
- 1 2-shelf rolling computer station (24"x36i")
- 1 Otoscope 25020 (Welch Allyn)
- 1 Acoustic Systems (5867)
- 1 GSI-17 Audio Meter (Grason-Stodler)
- 1 GSI-38 Version 2
- 3 rolling office chairs
- 1 5-drawer medicine cabinet
- 1 refrigerator (GE)
- 1 thermometer (HealthCare logistics)
- 1 medication freezer
- 1 Acu Check

Telemed

- 1 refrigerator (Kenmore)
- 1 Polycom YSX7000 (Sony)
 - Camera, speaker, video visualize – 2 TVs
- 1 25" TV (Phillips)
- 1 3-shelf gray cart
- 3 rolling office chairs
- 1 standard chair
- 1 blood-draw chair
- 1 2-shelf rolling cart (24"x24")
- 1 3-shelf rolling cart, large, black (for TV) (Bretford)

- 1 exam bed (Ritter 304) (Midmark)
- 1 VHS (Phillips)
- 1 5-drawer lateral file cabinet
- 1 electronic stethoscope/otoscope (Welch Allyn)
- 1 MultiSync/Keytronic Nec (laptop to above item)
- 2 emergency bags
- 1 AMD Stethoscope Smart Steth
- 1 sterilizer (SuperDent)

QUARTERLY STATISTICS

Table 1. Critical Incidents – October - December 2009

	BCCY ADP: 129	JCY ADP: 81	Total 210
Suicide Attempts	0	0	0
Deaths	0	0	0
Health Care Grievances	0	0	0
OJJ denial of LSU recommendation	0	0	0
Substantiated charges of abuse/neglect against LSU staff	0*	0	0
OCS reports filed by LSU Medical Staff	1	0	1
OCS reports filed by LSU MH Staff	1	0	1
Psychiatric Admits	0	0	0
Escapes	0	0	0
<i>Reportable Injury</i>			
Injury that threatens life or limb	0	0	0
Injury that severely restricts usual activity	0	2	2
Injury requiring urgent treatment by a physician	3	9	12

- Reportable injury counts include the most serious category selected in either the original A&I or the follow-up completed by the time of this report

Table 2. Mental Health Statistics – October - December 2009

	BCCY ADP:129	JCY ADP:81	Total 210
<i>Self-Injurious Behaviors (SIB)</i>			
# of incidents	27	24	51
# of youth	20	16	36
by scraping/cutting	3	13	16
by burning	0	0	0
by swallowing foreign objects	3	0	3
by placing object around neck	1	5	6
other	20	6	26
SIB requiring treatment in the infirmary	26	16	42
SIB requiring transfer to hospital	1	0	1
Mental Health restraint	0	0	0
Constant suicide watch - # of Incidents	3	9	12
Constant suicide watch - # of Youth	3	9	12
Close suicide watch - # of Incidents	6	35	41
Close suicide watch - # of Youth	6	27	33
Transfer of SMI youth to another OJJ secure facility (LSU MH Assessment)	3	3	6
Transfer of SMI youth to another OJJ secure facility (Exigent Circumstances)	0	0	0
Releases of SMI youth	18	13	31
SMI youth placed in CIU - # of Incidents	-	287	287
SMI youth placed in CIU - # of Youth	-	111	111
(- Data are not available or not applicable)			

Table 3. Medical Statistics – October - December 2009

	BCCY ADP:129	JCY ADP:81	Total 210
Infirmary admits - # of incidents	4	65	69
Infirmary admits - # of youth	4	46	50
Infirmary Average Daily Census	0.2	3.33	1.76
PZT reports filed by Medical staff	2	8	10
PZT reports filed by MH Staff	1	0	1
Emergency Room Visits	11	17	28
Hospital Admits	1	0	1
Hospital stay days including ER admit days	91	0	91

Table 4. Medical Population Statistics – October - December 2009

	BCCY ADP:129	JCY ADP:81	Total 210
<i>CMI youth</i>			
Total CMI Youth	29	9	38
Youth with Asthma	24	2	26
Youth with Diabetes	0	0	0
INH Prophylaxis	2	1	3
Youth with Seizure Disorders	3	0	3
Youth with HIV	0	1	1
Youth with Hepatitis B	0	0	0
Youth with Hepatitis C	0	0	0
Other	1	6	7

Table 5. Specialty Classification Population Statistics – October - December 2009

	BCCY ADP:129	JCY ADP:81
Mentally Retarded Youth	2	3
Sex Offenders	16	8
SMI Youth	41	43
Substance Use Disorders	58	62
Co-Occurring Disorders	14	32

**Table 6. SMI Youth Diagnostic Categories – For October - December 2009 Admits
(Primary Diagnoses for SMI Youth)**

	Number of Youth with Diagnosis	Percentage of SMI Youth With Diagnosis
<i>Primary Diagnoses</i>		
Adjustment Disorders	1	6%
Affective Disorders	8	44%
Behavior/Conduct/Impulse Control Disorders	6	33%
Bipolar Disorder NOS	2	11%
Post Traumatic Stress Disorder	1	6%

**Table 7. SMI Youth Diagnostic Categories – For October - December 2009 Admits
(Secondary Diagnoses for SMI Youth)**

	Number of Youth with Diagnosis	Percentage of SMI Youth With Diagnosis
<i>Secondary Diagnoses</i>		
Affective Disorders	1	6%
Anxiety Disorders	1	6%
Behavior/Conduct/Impulse Control Disorders	7	39%
Other Diagnosis	1	6%
Post Traumatic Stress Disorder	3	17%
Substance Use/Abuse/Dependence	5	28%

Table 8. Medical Care – Most Frequent Services*

BCY	Total	JCY	Total	Grand Total
A&I:	612	A&I:	397	1009
Nursing Call-Outs:	316	Nursing Call-Outs:	654	970
OTC Med:	81	OTC Med:	286	367
OTC Care:	50	OTC Care:	705	755
Weight:	31	Weight:	117	148
Patient Edu:	271	Patient Edu:	707	978
Vitals:	84	Vitals:	353	437
Phys Call Out:	153	Phys Call Out:	1	154
NP Call Out:	0	NP Call Out:	712	718
PA Call Out:	290	PA Call Out:	0	284
Health Call:	259	Health Call:	194	453
DME:	46	DME:	326	372
Vacc/Immunizations	156	Vacc/Immunizations	133	289
MD Follow Up:	36	MD Follow Up:	300	336
Lab Draw:	104	Lab Draw:	76	180

* Information obtained from the electronic daily infirmary log